

Board of Behavioral Sciences

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PROFESSIONAL CLINICAL COUNSELOR DEGREE PROGRAM CERTIFICATION OUT-OF-STATE DEGREE

This form is for applicants with an Out-of-State Degree				
Type or print clearly in ink				
Applicant Name: Last	First	Middle		
SSN or Individual Taxpayer ID Number:	Enrollment Date:	Degree Award Date:		
APPLICANT: This form must be completed by your school. The purpose of this form is to verify the specifics of a degree from a school located outside of California, or from an online program that is not designed to meet California's requirements. Submit a copy of course syllabi as indicated in the application instructions. The Board may require additional information to verify course content. <i>Note: This form is not required for applicants with a degree earned outside of the United States or its territories.</i> SCHOOL: The applicant named above is applying for licensure in California. Please complete this				
form, including the certification at the end, and provide the applicant with the original IN A SEALED ENVELOPE or send it to: bBSLPCCtranscripts@dca.ca.gov . The full legal text of the LPCC degree requirements can be found in the California Business and Professions Code, available on the Board's website under Statutes and Regulations .				
A. Number of units in degree: Se	emester units 🔲 Quarter Uni	its		
B. At the time the degree was conferred, was the program CACREP accredited? Yes \(\subseteq \text{No } \subseteq \) If YES, attach documentation of accreditation.				
C. CORE CONTENT AREAS: The applicant has completed coursework that is the equivalent of at least three (3) semester units or four (4) quarter units in each of the following areas:				
Yes No Counseling and psychotherapeutic theories and techniques, including the counseling process in a multicultural society, an orientation to wellness and prevention, counseling theories to assist in selection of appropriate counseling interventions, models of counseling consistent with current professional research and practice, development of a personal model of counseling, and multidisciplinary responses to crises, emergencies, and disasters. Number of units: Course number(s)/Term(s):				

Applicant Name:	Last	First	Middle
2. Yes 🗌 No 🗌	Human growth and development across the lifespan, including normal and abnormal behavior and an understanding of developmental crises, disability, psychopathology, and situational and environmental factors that affect both normal and abnormal behavior.		
	Number of units: Co	ourse number(s)/Term(s):	
3. Yes No	<u>Career development theories and techniques</u> , including career development decision-making models and interrelationships among and between work, family, a other life roles and factors, including the role of multicultural issues in career development.		
	Number of units: Co	ourse number(s)/Term(s):	· · · · · · · · · · · · · · · · · · ·
4. Yes No	Group counseling theories and techniques, including principles of group dynamics, group process components, developmental stage theories, therapeutic factors of group work, group leadership styles and approaches, pertinent research and literature, group counseling methods, and evaluation of effectiveness.		
	Number of units: Co	ourse number(s)/Term(s):	
5. Yes No	standardized and non-stand referenced and criterion-referenced to as	I testing of individuals, including basidardized testing and other assessmeterenced assessment, statistical concisessment and evaluation of individuing, administering, and interpreting as in counseling.	ent techniques, norm- cepts, social and als and groups, and
	Number of units: Co	ourse number(s)/Term(s):	
6. Yes No	developing cultural self-awa justice, individual and comm diverse populations, and co processes of intentional and	ories and techniques, including courareness, identity development, promonunity strategies for working with and unselors' roles in eliminating biases dunintentional oppression and discripturse number(s)/Term(s):	oting cultural social d advocating for and prejudices, and imination.
	oc		
7. Yes No	current diagnostic tools, suc Manual, the impact of co-oc disorders, established diagr treatment modalities and pla	process, including differential diagnoch as the current edition of the Diagnocurring substance use disorders or nostic criteria for mental or emotional acement criteria within the continuur	nostic and Statistical medical psychological I disorders, and the n of care.
	Number of units: Co	ourse number(s)/Term(s):	· · · · · · · · · · · · · · · · · · ·

Applicant Name:	Last	First	Middle
8. Yes 🗌 No 🗍	Research and evaluation, including studies that provide an understanding of research methods, statistical analysis, the use of research to inform evidence-based practice, the importance of research in advancing the profession of counseling, and statistical methods used in conducting research, needs assessment, and program evaluation.		
	Number of units: C	ourse number(s)/Term(s):	
9. Yes □ No □	standards and legal considerable delineate the profession's standards and legal considerable delineate the profession's standards and legal considerable delineate the profession's standards and legal considerable delineate the profession of the p	hics, and law in counseling, including lerations, licensing law and process, scope of practice, counselor-client pangerous to self or others, treatment elationship between practitioner's send relationships with other human set, and advocacy processes needed to bede access, equity, and success for	regulatory laws that rivilege, of minors with or ense of self and ervice providers, o address institutional
	Number of units: C	ourse number(s)/Term(s):	
10. Yes	classifications, indications, psychopharmacological memodication evaluations and identified.	uding the biological bases of behavior and contraindications of commonly edications so that appropriate referred so that the side effects of those meaning ourse number(s)/Term(s):	prescribed als can be made for
11. Yes 🗌 No 🗍	addiction, major approache of substance abuse and ac populations at risk, the role resources.	uding substance abuse, co-occurring to identification, evaluation, treatmodication, legal and medical aspects of support persons, support system ourse number(s)/Term(s):	nent, and prevention of substance abuse, and community
12. Yes No	crises, emergencies, or dis effects associated with trau assessment strategies for d individuals with mental or e disaster.	g, including crisis theory; multidiscipl easters; cognitive, affective, behavior uma; brief, intermediate, and long-te- clients in crisis and principles of inter emotional disorders during times of c	ral, and neurological rm approaches; and rvention for crisis, emergency, or
	Number of units: C	ourse number(s)/Term(s):	

Applicant Name:	Last	First	Middle		
13. Yes 🗌 No 🗌	Advanced counseling and psychotherapeutic theories and techniques, including the application of counseling constructs, assessment and treatment planning, clinical interventions, therapeutic relationships, psychopathology, or other clinical topics.				
	Number of units: Course number(s)/Term(s):				
D. Yes 🗌 No 🗌	ADVANCED COURSEWORK: <u>In addition to</u> the course requirements listed in #1 – 13 above, the applicant's degree contains <u>15 semester units</u> or <u>22.5 quarter units</u> that develop knowledge of specific treatment issues or special populations.				
	Number of units: Course number(s)/Term(s):				
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E. Yes No	SUPERVISED PRACTICUM: The applicant's degree program contained <u>6</u> semester units or 9 quarter units of practicum or field study that included at least <u>280 hours</u> of face-to-face supervised clinical experience counseling individuals, families, or groups.				
	Number of units:	Number of Hours:			
	Course number(s)/Term(s	s):			
F. Yes 🗌 No 🗌	Did the applicant's degree program contain 6 hours of content related to suicide risk assessment and intervention? (Note: Not required to be part of degree program)				
G. Yes 🗌 No 🗌	Did the applicant's degree program contain 3 hours of coursework in the provision of mental health services via telehealth, including law and ethics related to telehealth? (Note: Not required to be part of degree program)				
		ERTIFICATION			
	I nereby certify that all (of the foregoing is true and correc	X .		
Signature of Chief Authorized Design	Academic Officer or nee	Name of Institution			
Print Name		Campus City and State			
Date Signed		Institution Accredited or App	 proved by		