



Board of Behavioral Sciences
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ASSOCIATE MARRIAGE AND FAMILY THERAPIST IN-STATE DEGREE PROGRAM CERTIFICATION FORM A

This form is for use by the following applicants:

- The applicant began graduate study before August 1, 2012 and completed that study on or before December 31, 2018 **AND**
- The applicant degree program is NOT designed to meet the “2012” educational requirements

Contact your school if you have questions about which form to use

➔ INSTRUCTIONS FOR APPLICANT

The purpose of this form is for your school to verify completion of a degree program that complies with California Business and Professions Code (BPC) [section 4980.37](#). It may also be used to verify completion of additional coursework required prior to licensure.

- This form must be provided with your application in an envelope that has been sealed by your school OR sent by your school directly to the Board via email.
- Unless otherwise indicated on this form, your degree must **fully** contain all of the requirements specified herein to qualify for registration. There are no exceptions.
- The Board recommends obtaining a copy of this completed form and reviewing it prior to applying so that you can determine whether your degree qualifies.

➔ INSTRUCTIONS FOR SCHOOL

The applicant is applying for a registration with the Board of Behavioral Sciences. Please complete this form including the certification on the last page and provide the applicant with the original IN A SEALED ENVELOPE or send directly to the Board at BBStranscripts@dca.ca.gov.

If any transferred-in units were accepted, attach a letter of explanation identifying those courses and describing how they were applied to the student’s program.

The full legal text of the educational requirements is located in Business and Professions Code (BPC) [section 4980.37](#) and also available on the Board’s website under [Statutes and Regulations](#).

**ASSOCIATE MARRIAGE AND FAMILY THERAPIST
IN-STATE DEGREE PROGRAM CERTIFICATION
FORM A**

Applicant Name: Last	First	Middle
SSN or Individual Taxpayer ID Number:	Date Began Graduate Study mm/dd/yyyy	

Yes No 1. Was the student notified by means of public documents or otherwise in writing that the degree program is designed to meet the requirements of BPC section 4980.37? *If NO, attach an explanation.*

Yes No 2. Was the applicant's degree program a single integrated program primarily designed to train marriage and family therapists, containing no less than 48 semester units or 72 quarter units of instruction?

NOTE: If the applicant's degree program was accredited by COAMFTE, the applicant is exempt from this requirement. Attach documentation of accreditation if exemption is requested.

Yes No 3. Did the applicant's degree program contain no less than six (6) semester units or nine (9) quarter units of supervised practicum as defined in BPC section 4980.37(c)(1)?

Course number(s): _____

Yes No 4. Did the applicant's practicum include a minimum of 150 hours of face-to-face experience counseling individuals, couples, families or groups as specified in BPC section 4980.37(c)(2)?

NOTE: Only required for applicants who enrolled in their degree program on or after January 1, 1995

Applicant Name: Last	First	Middle
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Yes No 5. Did the applicant's degree program include no less than 12 semester units or 18 quarter units of coursework in the areas of marriage, family, and child counseling and marital and family systems approaches to treatment as specified in BPC section 4980.37(b), and include all of the following areas?

- The salient theories of a variety of psychotherapeutic orientations directly related to marriage and family therapy, and marital and family systems approaches to treatment.
- Theories of marriage and family therapy and how they can be utilized in order to intervene therapeutically with couples, families, adults, children, and groups.
- Developmental issues and life events from infancy to old age and their effect upon individuals, couples and family relationships.
- A variety of approaches to the treatment of children.

NOTE: If the applicant's degree program was accredited by COAMFTE, the applicant is exempt from this requirement. Attach documentation of accreditation if exemption is requested.

Course numbers: _____

Yes No 6. Did the applicant complete coursework in the diagnosis, assessment, prognosis, treatment planning and treatment of mental disorders as specified in BPC section 4980.37(c)(1)?

Course number(s): _____

Yes No 7. Did the applicant's degree program prepare students to be familiar with cross-cultural mores and values, including a wide range of racial and ethnic backgrounds as specified in BPC section 4980.37(e)(7)?

Course number(s): _____

Applicant Name: Last	First	Middle
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ADDITIONAL COURSEWORK: The following courses are NOT required to be part of the applicant's degree program but are required for licensure. Completion of this section will assist the applicant in the licensure process. Mark "Yes" if the applicant's degree program contained the below content, and specify the number of units or hours.

Yes No 8. Did the applicant complete a two (2) semester unit or three (3) quarter unit course in California law and professional ethics as described in BPC section 4980.41(a)(1)?

Units: _____ Course number(s): _____

Yes No 9. Did the applicant complete a minimum of seven (7) hours of training or coursework in child abuse assessment and reporting as described in BPC sections 28 and 4980.41(a)(2)?

Hours: _____ Course number(s): _____

Yes No 10. Did the applicant complete a minimum of 10 hours coursework in human sexuality as described in BPC section 4980.41(a)(3)?

Hours: _____ Course number(s): _____

Yes No 11. Did the applicant complete a minimum of 15 hours of coursework in alcoholism and other chemical substance dependency as required by BPC section 4980.41(a)(4) and Title 16, California Code of Regulations section 1807.3?

Hours: _____ Course number(s): _____

Yes No 12. Did the applicant complete coursework in spousal or partner abuse assessment detection, and intervention as specified in BPC section 4980.41(a)(5)?

If the applicant began graduate study on or after January 1, 2004, a minimum of 15 hours in this topic area is required.

Hours: _____ Course number(s): _____

Yes No 13. Did the applicant complete a minimum of 6 hours of coursework in aging and long-term care, including instruction on the assessment and reporting of, as well as treatment related to elder and dependent adult abuse and neglect as described in BPC section 4980.39?

Hours: _____ Course number(s): _____

Applicant Name: Last	First	Middle
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ADDITIONAL COURSEWORK (continued):

Yes No 14. Did the applicant complete a minimum of 6 hours of training or coursework in suicide risk assessment and intervention as described in BPC section 4980.396?

Number of Hours: _____

Yes No 15. Did the applicant complete a minimum of 3 hours of coursework in the provision of mental health services via telehealth, including law and ethics related to telehealth as described in BPC section 4980.395?

Number of Hours: _____

Yes No 16. Did the applicant complete a minimum of two (2) semester units or three (3) quarter units in psychological testing as described in BPC section 4980.41(a)(6)?

NOTE: Only required of applicants who began graduate study on or after January 1, 2001.

Units: _____ Course number(s): _____

Yes No 17. Did the applicant complete a minimum of two (2) semester units or three (3) quarter units in psychopharmacology as described in BPC section 4980.41(a)(7)?

NOTE: Only required of applicants who began graduate study on or after January 1, 2001.

Units: _____ Course number(s): _____

CERTIFICATION

I hereby certify that all of the foregoing is true and correct

Signature of Chief Academic Officer or Authorized Designee

Name of Institution

Print Name

Campus City and State

Date Signed

Institution Accredited or Approved by

Email Address