

**BEHAVIORAL HEALTH AND HUMAN SERVICE LICENSING BOARD
LICENSED MENTAL HEALTH COUNSELOR ASSOCIATE (LMHCA)
BY EXAMINATION
INFORMATION AND INSTRUCTIONS**

Before completing and submitting your application to our office, please read all materials and information included.

DOCUMENTS TO DOWNLOAD

Applicants must download the following documents from the Board's Website at: www.pla.in.gov:

1. Application for Licensure as a Mental Health Counselor Associate
2. Information and Instruction Sheet
3. Statutes and Administrative Rules which pertain to the Behavioral Health and Human Service Licensing Board

IPLA ADDRESS/TELEPHONE NUMBER/EMAIL/WEBSITE

Indiana Professional Licensing Agency
402 West Washington Street, Room W072
Indianapolis, Indiana 46204
Staff Phone: (317) 234-2054
Staff Email: pla8@pla.IN.gov
Website: www.pla.IN.gov

CRIMINAL BACKGROUND CHECK REQUIRED

An individual applying for a mental health counselor associate license shall submit to a national criminal history background check at the cost of the individual. Please follow the step-by-step directions on how to complete the fingerprinting process in order to process your criminal background check at <http://www.in.gov/pla/3241.htm>.

Criminal background checks must be obtained after you apply for your mental health counselor associate license with the Board and prior to the issuance of a license. An email will be sent to you upon the receipt of your application by our office explaining that you are eligible to complete your criminal background check.

WHAT IF I RESPOND "YES" TO ONE OF THE QUESTIONS ON THE APPLICATION?

Please read the questions on the application very carefully. If you need to respond "yes" please submit a notarized affidavit of the incident (such as the date, where it occurred, what happened, the charge and the outcome of the incident) and any court documents. Based upon your response, you may be required to make a personal appearance before the Board. Please note that an appearance before the Board may delay your license or being approved for the examination.

WHAT IF I RESPOND "NO" TO ONE OF THE QUESTIONS AND THE CRIMINAL BACKGROUND CHECK REVEALS SOMETHING?

Please read the questions on the application very carefully. You will be notified of such and will be required to submit the required documents and explain why you failed to respond yes to the question. Also you may be required to appear before the Board. Please note that an appearance before the Board may delay your license or being approved for the examination.

THE FAIR INFORMATION PRACTICE ACT

In compliance with Ind. Code 4-1-6, this agency is notifying you that you must provide the requested information or your application will not be processed. You have the right to challenge, correct, or explain information maintained by this agency. The information you provide will become public record. Your examination scores and grade transcripts are confidential except in circumstances where their release is required by law, in which case you will be notified.

APPLICATION REVIEW BY THE BOARD

Once your application is complete with all required documentation it will be reviewed by the Board. After review you will be notified as to whether you have been approved for the examination or whether additional information is required.

EXAMINATION REQUIREMENT

The Board has adopted the National Board for Certified Counselors (NBCC) National Counselor Examination (NCE) to obtain a mental health counselor associate license. You may use current licensure/certification as a mental health counselor associate in another state to exempt yourself from taking the examination, provided you took the NCE examination in another state or an equivalent state constructed examination at the same level or higher.

If you did not take an examination to receive licensure/certification in the another state at the same level or higher level, you will be required to take the NCE before you will be licensed as a mental health counselor associate in the State of Indiana. If you have taken the NCE examination, you will only be required to take the Indiana jurisprudence (law) examination.

Official Score Report: Upon completion of the NCE examination, results will be released to our office the first Friday of the following month the examination was administered. If you passed the examination, your mental health counselor license associate will be issued. If you failed the examination, you will receive notification from our office via email that will include instructions on how to apply to retake the examination. Please allow 7 to 10 business days for our office to process examination results once they are received.

Failed Examinations: Applicants who have failed the examination and who wish to retake the examination, must submit a Repeat Examination Application, fees and other requirements as determined by the Board. Repeat examination candidates must wait a period of ninety (90) days from the date of the failed examination before being approved to retake the examination. An applicant who has failed the examination three (3) times shall personally appear before the Board at the next available meeting prior to retaking the examination.

All questions and requests for information about the NCE licensure examination should be directed to:

NBCC
Certification Department
3 Terrace Way
Greensboro, NC 27403
Voice: 336-547-0607
Fax: 336-547-0017
Web site: www.nbcc.org

JURISPRUDENCE EXAMINATION

All endorsement applicants for mental health counselor associate licensure are required to pass a jurisprudence examination. No applicant is exempt from this requirement.

After the approval of your application by the Board, you will be notified by email that you are eligible to take the jurisprudence examination. Upon notification from the applicant that they are ready to take the jurisprudence examination, the examination and instructions will be emailed to you. You will have fourteen (14) days from the date the email is sent to you with the Jurisprudence Examination and Instructions in order to complete the examination and return the required information to our office.

All applicants applying by endorsement or exemption of examination will be examined on the statutes and rules of Indiana for the Behavioral Health and Human Services Licensing Board. This is a 30 question true-false and multiple-choice examination. Passing criteria is 75%. Statutes and Administrative Rules are available to download at www.pla.IN.gov.

ABANDON APPLICATIONS

If an applicant does not submit all requirements within one (1) year after the date on which the application is filed, the application for licensure is abandoned without any action of the Board. An application submitted subsequent to an abandoned application shall be treated as a new application.

ISSUANCE OF LICENSE

Upon issuance of your license by the Board, you will be sent an email notifying you that your license has been issued. There will be instructions on how to purchase a blue license card to be mailed to you or how to download a free license card for immediate printing.

Ind. Code 25-23.6-4.5-3(b) requires that an individual who is licensed as a mental health counselor associate shall:

- (1) Display the license or a clear copy of the license at each location where the mental health counselor regularly practices; and
- (2) Includes the words "licensed mental health counselor associate" or the letters "LMHCA" on all promotional materials, including business cards, brochures, stationary, advertisements, and signs that name the individual.

Therefore, you must either download the free license card or purchase a blue license card to post. IPLA staff cannot print license cards to be mailed or for walk-ins to our office.

This service is available on our website at www.in.gov/pla/license.htm.

LICENSE EXPIRATION AND CONTINUING EDUCATION

Mental health counselor associates licensed in the State of Indiana are required to obtain at least forty (40) hours of continuing education, with at least twenty (20) hours of Category I Continuing Education to include two (2) hours of Category I Ethics Continuing Education, in order to renew their license. A mental health counselor associate who has been licensed less than twenty-four (24) months will need 20 hours of continuing education with one (1) hour of Category I Ethics continuing education to renew their license. A mental health counselor associate who has been licensed less than twelve (12) months is not required to obtain continuing education in order to renew their license. An individual may renew a mental health counselor associate license two (2) times.

Detailed information regarding the continuing education requirement is available at the Board's website at www.pla.IN.gov or you may contact our office by calling (317) 234-2054 or by email at pla8@pla.IN.gov.

LICENSED MENTAL HEALTH COUNSELOR ASSOCIATE APPLICATION FOR LICENSURE BY EXAMINATION INSTRUCTIONS

All applicants must submit an application and supporting documentation to:

Indiana Professional Licensing Agency
Attn: Behavioral Health and Human Services Licensing Board
402 West Washington Street, Room W072
Indianapolis, Indiana 46204

TEMPORARY PERMITS

If you wish to have an associate temporary permit issued please submit, in addition to the application fee of \$50.00, a fee of \$25.00. The permit will be issued upon the approval of your application by the Board to take the NCE examination. An associate temporary permit issued expires one (1) year after the date the permit is issued, without regard to the number of times the individual has taken the required examination to become a licensed mental health counselor associate. You are only allowed to have one permit and the temporary permit may not be renewed.

If you do not pass the examination the associate temporary permit will remain valid for a period of one year. However if you wish to retake the NCE examination you will be required to submit the Repeat Application and all required documentation as provided by the Board with your notification of failure.

APPLICATION

Submit your Application for Licensure as a Mental Health Counselor Associate (LMHCA)

**Please make sure that you have completed and signed the application in all places required.*

**The name on your application must match your 2 pieces of ID that is required in order for you to enter the examination.*

AFFIDAVIT

If you answer "yes" to any of the seven (7) questions on the application, the applicant must explain fully in a signed and notarized affidavit, meaning an explanation or statement of facts and or events, including all related details. Describe the event including location, date and disposition. If you have a malpractice action, provide name(s) of plaintiff(s). Letters from attorneys or insurance companies are not accepted in lieu of your statement; however, they may accompany your affidavit.

If the applicant has been ***arrested; entered into a prosecutorial diversion or deferment agreement; convicted; pled guilty to or pled nolo contendere to any offense, misdemeanor, or felony in any state***, except for minor violation of traffic law resulting in fines, and arrests or convictions that have been expunged by a court, the applicant shall submit a notarized statement detailing all criminal offenses, excluding minor traffic violations. The notarized statement must include the following information:

- (1) The date(s), location(s), court, and cause number.
- (2) The offense, misdemeanor or felony of which the applicant was arrested for, entered into a prosecutorial diversion or deferment agreement; convicted, pled guilty to or pled nolo contendere to.
- (3) The penalty imposed.

Also, included with your notarized statement, you will need to provide copies of any and all court documentation regarding each offense listed.

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A criminal background check completed prior to the submission of your application for licensure will not be considered valid. If an application is not received by IPLA before scheduling a criminal background check, the applicant will be required to submit to another check resulting in additional fees.

WHAT IF I HAVE TO RESPOND "YES" TO ONE OF THE QUESTIONS ON THE APPLICATION?

Please read the questions on the application very carefully. If you need to respond "yes" please submit a notarized affidavit of the incident (such as the date, where it occurred, what happened, the charge and the outcome of the incident) and any court documents. Based upon your response, you may be required to make a personal appearance before the Board. Please note that an appearance before the Board may delay your license or being approved for the examination.

WHAT IF I RESPOND "NO" TO ONE OF THE QUESTIONS AND THE CRIMINAL BACKGROUND CHECK REVEALS SOMETHING?

Please read the questions on the application very carefully. You will be notified of such and will be required to submit the required documents and explain why you failed to respond yes to the question. Also you may be required to appear before the Board. Please note that an appearance before the Board may delay your license or being approved for the examination.

FEE INFORMATION

Applicants must submit a **fifty dollar (\$50.00)** application fee and **twenty-five (\$25.00)** associate temporary permit fee, made payable to the Indiana Professional Licensing Agency. Checks or Money orders are acceptable.

All fees are non-refundable and nontransferable.

PHOTOGRAPH

Applicants must submit one (1) photograph, approximately 2 x 3 inches, head and shoulders view of the applicant only, black and white or color, of professional quality. No "Polaroid" type photographs, laminated photographs, laminated identification cards or group photographs will be accepted.

EDUCATION

Applicants must submit an official transcript, **sent directly to the Board from the college or university**, from which you obtained the degree, showing that all requirements for graduation have been met and the date the degree was conferred. Copies of transcripts, transcripts issued to applicants, or incomplete (not yet showing your degree has been granted) transcripts are not acceptable. Electronic transcripts may be sent to pla8@pla.in.gov.

Applicants for a mental health counselor license or mental health counselor associate license must have received a **masters or doctorate degree in an area of mental health counseling** from an eligible postsecondary educational institution that meets the requirements of the board.

An applicant for a mental health counselor license associate license must complete the following educational requirements:

- (1) Complete sixty (60) semester hours of graduate course work in counseling that must include either a master's degree that required not less than forty-eight (48) semester hours or a doctor's degree in counseling. The graduate course work must include the following content areas:
 - (A) Human growth and development.
 - (B) Social and cultural foundations of counseling.
 - (C) Helping relationship, including counseling theory and practice.
 - (D) Group dynamics, processes, counseling, and consultation.

- (E) Lifestyle and career development.
- (F) Assessment and appraisal of individuals.
- (G) Research and program evaluation.
- (H) Professional orientation and ethics.
- (I) Foundations of mental health counseling.
- (J) Contextual dimensions of mental health counseling.
- (K) Knowledge and skills for the practice of mental health counseling and psychotherapy.
- (L) Clinical instruction.

FORM C – VERIFICATION OF GRADUATE COURSEWORK FOR LMHCA

Complete Form C and submit it with your application. Form C-1 Graduate Coursework Content Area may help you in completing Form C.

PRACTICUM AND INTERNSHIP

Applicants must complete one (1) supervised clinical practicum, internship, or field experience in a counseling setting, which must include a minimum of seven hundred (700) clock hours consisting of one (1) practicum of one hundred (100) hours and one (1) internship of six hundred (600) hours with at least sixty-six (66) hours of face to face supervision. This requirement may be met by a supervised practice experience that took place away from an eligible postsecondary educational institution but that is certified by an official of the eligible postsecondary educational institution as being equivalent to a clinical mental health graduate level practicum or internship program at an institution accredited by an accrediting agency approved by the United States Department of Education or the Association of Universities and Colleges of Canada.

FORM P – VERIFICATION OF PRACTICUM FOR LICENSURE AS A MENTAL HEALTH COUNSELOR ASSOCIATE

Form P must be completed and signed by your school or university verifying your practicum and face-to-face supervision hours and received directly from the school or university.

FORM I – VERIFICATION OF INTERNSHIP AS A MENTAL HEALTH COUNSELOR ASSOCIATE

Form I must be completed and signed by your school or university verifying your internship and face-to-face supervision hours and received directly from the school or university.

FORM AI – VERIFICATION OF ADVANCED INTERNSHIP AS A MENTAL HEALTH COUNSELOR ASSOCIATE

The Statute no longer requires the completion of an Advanced Internship. Please ignore this form.

VERIFICATION OF LICENSURE

Applicants must provide a Verification of State Licensure/Certification form from each state in which you currently are, or have ever been, licensed, certified or registered in any regulated health profession or occupation. This information must be **sent directly to the Board by the state** that issued the license. This form is available on the Board's website.

If a state examination was administered, please have the state board attach the examination subjects and scores to the verification of licensure form. The information must be sent by the state or province that issued the license.

The top portion of this form should be completed by the applicant and sent to the appropriate state licensing board for their submission to the Indiana Professional Licensing Agency. The form may be duplicated if necessary. Other jurisdictions may charge a fee to verify licensure. You may wish to contact the state boards prior to your request for verification. You do not need to complete this form if you only hold licensure or certification in the State of Indiana.

OFFICIAL SCORE REPORT

If you have already taken and passed the National Board for Certified Counselors (NBCC) National Counselor Examination (NCE) please contact the NBCC to have your NCE scores sent to the Board. Individual score reports from the applicant will not be accepted. If you have taken a State Licensing Board examination (State constructed

examinations) please contact the state board and request that an official score report be sent to the Indiana Professional Licensing Agency.

Any examination other than the NCE will be reviewed by the Board on an individual basis to determine equivalency.

NAME CHANGE

An official affidavit indicating any legal name change or a notarized copy of a marriage certificate, divorce decree, social security card or court papers is acceptable if your name differs from that on any of your documents.

**LICENSED MENTAL HEALTH COUNSELOR ASSOCIATE (LMHCA)
APPLICATION FOR LICENSURE BY EXAMINATION
TEMPORARY PERMIT INFORMATION
INSTRUCTIONS**

The Board may issue a temporary permit to practice as a mental health counselor associate to an applicant who submits the following:

1. A completed application for licensure as a mental health counselor associate including all supporting documentation.
2. An additional fee of twenty-five dollars (\$25.00) for the temporary permit.

The temporary permit expires on:

A temporary permit issued under IC 25-23.6-8.5-1.5(b) expires one (1) year after the date the permit is issued, without regard to the number of times the individual passes or fails the required examination to become a licensed mental health counselor associate. The temporary permit may not be renewed.

A temporary permit will be issued upon the approval of your application to sit for the NBCC NCE examination.

IC 25-23.6-8.5-1.5 Mental health counselor associate license requirements; associate temporary permit

(b) The board shall issue an associate temporary permit to practice mental health counseling to an individual who:

- (1) meets the educational requirements for a license as a mental health counselor;
- (2) is pursuing the required clinical supervisory hours for a license as a mental health counselor; and
- (3) pays a fee for the temporary permit set by the board.

An associate temporary permit issued under this subsection expires one (1) year after the date the permit is issued, without regard to the number of times the individual passes or fails the required examination to become a licensed mental health counselor. The temporary permit may not be renewed.

**LMHCA by EXAMINATION
APPLICATION CHECKLIST**

If you are applying for licensure as a mental health counselor associate (LMHCA) by examination, you must complete and submit the following forms.

- _____ Completed Application Form
- _____ One (1) passport quality photograph
- _____ \$50 Application Fee
- _____ \$25 Associate Temporary Permit Fee
- _____ Notarized affidavit explaining any “yes” answer on the application which includes the required documentation
- _____ Criminal History Background Check (CBC)
- _____ Official Transcript(s) sent directly from the university or school
- _____ Form C – Verification of Graduate Coursework
- _____ Form P – Verification of Practicum (100 hours)
- _____ Form I – Verification of Internship (600 hours)
- _____ Official Examination Report from the NBCC of your NCE Scores (If you have taken and passed the examination)
- _____ Out of State License Verification(s) (If applicable)