



## West Virginia Board of Examiners in Counseling

815 Quarrier Street, Suite 212, Charleston, West Virginia 25301

Telephone: (304) 558-5494 Email: [counselingboard@msn.com](mailto:counselingboard@msn.com) website: [www.wvbec.org](http://www.wvbec.org)

### LMFT RENEWAL INSTRUCTIONS 2014-2016

*The instructions provided are to expedite processing your renewal application.*

*Applications not adhering to the instructions could be delayed.*

The processing time for a renewal application is six (6) weeks. Therefore, if your license must be verified by an employer, insurance company, etc., on July 1, 2016, you must submit your renewal application to the Board office on or before May 15, 2016. If you submit a complete and correct renewal application packet on or before May 15, 2016 and it is approved, we will be able to verify your license on July 1, 2016.

If you have completed the required thirty five (35) continuing education contact hours, you may submit your completed renewal application packet to the Board office at any time between now and June 30, 2016. If you need verification that your renewal packet reached our office, please send it return/receipt certified. We will be unable to return phone calls concerning this matter.

**Licenses NOT renewed on time** (See Series 10 for more details at [www.wvbec.org](http://www.wvbec.org))

All licenses not renewed by the renewal date each renewal cycle shall expire. Any individual who has not renewed his or her license and who continues to practice after his or her license has been expired will be deemed guilty of unlicensed practice.

- All expired licenses, within 60 days after the renewal date, may renew their license upon payment of a renewal fee and a late fee. (Renewal fee \$220, Late fee \$50, per Series 9, LMFT Fee Rules)
- After the 60 days, individuals with expired licenses may reinstate their license upon payment of a renewal fee and a reinstatement fee. (Reinstatement Fee \$250, per Series 9, LMFT Fee Rules)

#### **Ethics Requirement**

Per Series 10, LMFT Renewal Rule, Effective July 1, 2010, the WVBE requires all West Virginia Licensed Marriage and Family Therapists to obtain during each renewal cycle, 3 contact hours in ethics based on the American Association for Marriage and Family Therapists (AAMFT) code of ethics. As the code of ethics adopted by the West Virginia Board of Examiners in Counseling, for the LMFT, the AAMFT code establishes principles that define the ethical behavior of licensed marriage and family therapists. All LMFTs in West Virginia are required to adhere to the Code of Ethics and the Standards of Practice. The Code of Ethics will serve as the basis for processing ethical complaints initiated against West Virginia LMFT. Ethical offerings approved through the WVBE are posted on [www.wvbec.org](http://www.wvbec.org).

#### **ALPS Requirement**

A licensee with approved professional supervisor status shall complete three (3) of the thirty-five (35) contact hours in clinical counseling/therapy supervision. The three hours can be completed as part of the 20 hours of home study or in a formal program. The program selected must have the words "clinical supervision" in the title or the description of the offering.



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### LMFT RENEWAL PACKET CHECKLIST 2014-2016

#### Complete the 2 page Application for Renewal

- Please print legibly
- Sign and date the Page 2

#### Complete the Continuing Education (CE) Recording Form

- Date: Complete the form with the program dates in order starting with the earliest (Ex: 07/01/14, 10/06/14, 02/13/15, etc.)\*
- **ONE EXCEPTION:** The AAMFT ethics and, if applicable, the ALPS clinical supervision training is listed first.
- **Course/Activity:** Name of program/activity attended or fulfilled. If you attended a large conference, please list the conference name and total # CE's completed, per the certificate of completion. You are not required to list the individual workshops you attended as part of the conference.
- **Focus Area:** Each program attended should fulfill a marriage and family therapy skill focus area. Please refer to page four (4) of this newsletter for the focus descriptions and choose one or more for each program you have logged on the recording form.
- **Provider Name:** Organization or Individual providing the program
- **Presenter's Names & Credential:** Name of the presenter and his or her credentials (Ex: J. Bly, MA). For larger conferences with many workshops, you may include 'various' for this section.
- **Number of Contact Hours:** Record the number of hours you earned in the program.
- If you need additional space, please copy the recording form

#### Attach copies of the completed CE certificates to the Recording Form

- Place the copies (AAMFT Ethics and ALPS Clinical Supervision first) behind the Recording Form in the same order the offerings are listed on your recording form.
- Please use a highlighter and highlight the following items on **each of the CE certificates:** title of offering, date of offering, number of contact hours, approval number, presenter's name and credentials.

#### Write your name and license number on all certificates and Recording form

- Place information in the upper right hand corner of each certificate. Labels are a convenient way to complete this task.

#### Enclose a check or money order payable to WVBEAC for \$220.00

- Renewal fee can be paid by credit card at [www.wvbec.org](http://www.wvbec.org). Follow the instructions provided at the credit card payment tab, PRINT your receipt and **include** it with your renewal materials. (Please do not email the receipt to the board.)

Mail the following in a 6" x 9" or 9" x 12" envelope. **Please do not** use a regular #10 envelope.

- 1) 2- page Application
- 2) Recording Form
- 3) Certificates of Completion
- 4) \$220.00 Renewal fee

#### Mail to:

- Please mail return/receipt certified if you would like verification that your renewal application reached the board office.

### LMFT License Renewal

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### LMFT CE FOCUS AREAS

- A Marriage and family studies: Courses in this area should present a fundamental introduction to marriage and family studies. The student should learn to think across a wide variety of family structures and a diverse range of issues (i.e. gender, culture, and substance abuse). Topic areas may include but not limited to: family development, subsystems, blended families, gender issues in families, cultural issues in families;
- B Systems theory: Courses in this area should address the historical development, theoretical and empirical foundations, and contemporary conceptual directions of the field of marriage and family therapy;
- C Research: Courses in this area should assist the student in understanding and performing research. Topic areas may include: research methodology, qualitative and quantitative methods, and statistics;
- D Professional ethics: Courses in this area must include the "American Association for Marriage and Family Therapy" (AAMFT) code of ethics, confidentiality and liabilities of clinical practice and research, professional ethics as a marriage and family therapist, professional socialization and the role of the professional organization, licensure or certification legislation, independent practice and inter professional cooperation. Religious ethics courses and moral theology courses do not meet this requirement;
- E. Human growth and development: Courses in this area should provide knowledge of personality development and its normal and abnormal manifestations. The student should have relevant coursework in human development across the lifespan, which includes special issues that should be integrated with systems concepts. Topic areas may include but are not limited to: human development, psychopathology, personality theory, human sexuality. Test and measurement courses do not meet this requirement;
- F. Appraisal of individuals and families: includes individual and family differences, methods of data gathering and interpretation, individual, family and group testing, and case study;
- G Principles of etiology, assessment, diagnosis, treatment planning, and prevention of mental and emotional disorders and dysfunctional behavior; and



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LMFT RENEWAL APPLICATION 2014-2016

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LMFT License # \_\_\_\_\_ LMFT License Issue Date: \_\_\_\_\_ Social Security # xxx-xx-\_\_\_\_\_

Name \_\_\_\_\_
FIRST MIDDLE LAST

Home Address \_\_\_\_\_

Please check here if this is a new address Street City State Zip Code

County of Residence \_\_\_\_\_ Home Phone \_\_\_\_\_

Present Employment (Only list primary job) Please indicate if: Retired or Unemployed

Position \_\_\_\_\_ Dates \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_
Street City State Zip Code

County \_\_\_\_\_

Work Phone \_\_\_\_\_ Work Fax \_\_\_\_\_

Employer Category Private Practice Non-Profit Agency Profit Agency Hospital
Federal or State Agency College or School Other

Primary Email Address- Please PRINT: \_\_\_\_\_

Check mark the specialty areas, based on training and experience, from the list below, as is appropriate (and as reflected on your statement of professional disclosure):

- Career Counseling/Therapy
Consultation
Diagnosis and treatment of mental & emotional disorders
Employee Assistance Counseling/Therapy
Family Therapy
Human Resources Counseling/Therapy
Marriage Counseling/Therapy
Clinical Mental Health Counseling/Therapy
Rehabilitation Counseling/Therapy
School Counseling/Therapy
Substance Abuse & Addictions
Supervision
Vocational Counseling/Therapy
Other:

For Board Use Only:

Renewal Approved YES NO Date Approved \_\_\_\_/\_\_\_\_/\_\_\_\_

If no, action needed \_\_\_\_\_

# Of Hours Approved \_\_\_\_\_ Renewal returned \_\_\_\_/\_\_\_\_/\_\_\_\_

Computer: \_\_\_\_\_ Mailed Sticker: \_\_\_\_\_

Amount Pd. \$0 \$220.00

Online Credit Card Payment or Check # \_\_\_\_\_



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LMFT RENEWAL APPLICATION 2014-2016

Please check other CURRENT Licenses, Credentials, and/or Certifications you hold

- ALPS, LPC, School Counselor, Other, National Certified Counselor, Certified Rehabilitation Counselor, Certified Addictions Counselor, WV Social Work License, TSW, LSW, LCSW, LICSW, Expiration Date, WV Psychology License, Supervised, Clinical, School, Expiration Date, Are you an active member of AAMFT, Are you an active member of ACA?, Are you an active member of NBCC

Have you, in West Virginia or in any other State or Commonwealth,

You must check one

- 1). Had any license or certification to practice suspended, revoked, or subjected to any kind of disciplinary action?
2). Been convicted of a felony or crime involving moral turpitude?
3). Been an alcohol or drug abuser as defined in WV Code 30-31-9?
4). Been under declaration of mental incompetence?
5). Attempted to obtain a licensure by fraud, deceit, or willful misrepresentation?
6). Failed or refused to comply with provisions of licensure laws or promulgated laws?
7). Violated a marriage & family therapy Code of Ethics?
8). Impersonated another licensed marriage and family therapist?
9). Allowed your name or license to be used by another person?

FOR ANY "YES" RESPONSE, USE A SEPARATE SHEET FOR EXPLANATION

I am applying for LMFT licensure renewal by the West Virginia Board of Examiners in Counseling. I am submitting contact hours from (LMFT 2014 Renewal Date) through June 30, 2016. I understand renewal is contingent upon satisfactory completion of all the requirements. I attest I have given neither false nor misleading information in this application. I also understand that false or misleading information in connection with this application may be cause for rejection of the application, revocation of the license, and/or possible legal action for such fraudulent information.

If this is your FIRST RENEWAL please write the date you were licensed and the # of contact hours you are required to complete for this renewal. Please refer to your initial email notification at the time of licensure for this information.

Do you own all or part of a business that operates within West Virginia? Yes\*\*\* No

\*\*\*If yes, please enter the FEIN number of your business

WV2-6(18) provides that a board may not issue or renew a license for you to engage in the practice of a profession if you are in default under either the unemployment or workers compensation laws, or both laws of the state.

Signature Date Signed

THIS APPLICATION MUST BE SUBMITTED ON OR BEFORE JUNE 30, 2016 IN ORDER FOR YOUR LICENSE TO REMAIN CURRENT AND AVOID PAYING THE LATE OR REINSTATEMENT FEE.



