

West Virginia Board of Examiners in Counseling

815 Quarrier Street, Suite 212
Charleston, West Virginia 25301
(800) 520-3852
Rclay27@msn.com
www.wvbec.org

Information Sheet for a One-Time Approved Continuing Education Offering

Requirements for Approval

WVBEC reserves the right to monitor the approved programs and activities. Approval can be withdrawn from any program or activity, which does not adhere to the guidelines, set by the Board.

1. Competent individuals shall present the program. (Refer to subparagraph 6.2.a.2.A in rule 27CSR3)
2. The program shall meet the professional needs of the intended clientele, which shall include counselors.
3. The program shall have a minimum duration of one (1) contact hour.
4. One (1) contact hour means one-hour (60) minutes spent in a program.
5. The program shall have an agenda, clearly listing the time and date of the program, including starting and ending times of each session or section and refreshment and meal breaks.
6. The program shall have written goals and objectives that are responsive to the needs of prospective counselor attendees.
7. The program shall include an evaluation component directly related to its state goals and objectives.
8. The program shall be related to the counselor content areas as listed on the attached sheet.
9. The program shall be disseminated via appropriate instructional methods, such as lecture, group discussion, video, film or interactive teleconferencing.
10. The program shall be offered in a site that shall be accessible under the provisions of the American's With Disabilities Act.
11. The program's promotional information shall state that program approval has either been applied for or has been granted.
12. The provider of the program shall provide program participants certificates of completion, which contain the following printed (not hand written) information:
 - a. The title and dates of the program and the Board's approval number
 - b. The name of the sponsoring agency, organization or individual
 - c. The name of the participant and the number of contact hours of continuing professional education earned by the participant
 - d. The presenter (s) name and his or her credentials, and
 - e. The signature of the presenter and/or the official representative of the sponsoring organization.
 - i. If the certificate of completion is presented to the participant without all the above information, the participant will have cause to request a refund of the program fee.
13. The agency, organization, or individual shall submit their program approval request for review, on the attached form with the appropriate attachments, at least sixty (60) days prior to the scheduled program date.
14. If requesting approval for the 3 hour Ethics requirement for WV LPC, the offering must be based on the ACA Code of Ethics and presented by a current LPC.

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Application for a One-time Approved Continuing Education Offering

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1. Date of Program _____ 2. Location (City) _____
 3. Title of Program _____
 4. Intended Clientele _____
 5. Number of Contact Hours to be earned _____ 6. Cost of Program _____
 7. Sponsoring agency, organization, or individual _____
 8. Is your agency or organization Non-Profit or For-Profit? (Circle One)
 9. Address _____
 10. Phone # _____ Fax # _____ Email _____
 11. Content of program encompasses which focus areas? _____
(If requesting approval for the 3 hour Ethics requirement for WV LPC read and check #20 below)
 12. Describe the facility in which the program will take place. Is the facility accessible under the _____ provisions of the American's With Disabilities Act?

 13. Describe your grievance procedures and refund policy unless this information appears in your brochure.

 14. Describe your procedure for verifying attendance. _____
 15. Attach a check or money order for (1) \$100.00, per event, if your organization is a Non-Profit and no fee is charged to attending participants, OR (2) \$250.00, per event, if your organization is a For-Profit and/or a fee is charged to attending participants. (Per Series 2, Fees Rule, effective July 1, 2017).
 16. Attach a finished copy or rough draft of the brochure advertising the program.
 17. Attach a vita or resume of the presenter (s).
 18. Attach a copy of the form used by participants for evaluating the program.
 19. Attach a sample copy of the certificate of completion that will be issued.
 20. Please check if you wish to have the offering posted on our website?
 21. Please check if you are requesting approval for the 3-hour Ethics requirement for WV LPC? You will need to provide documentation that the offering is based on the ACA Code of Ethics.
 22. The signature below indicates that I have read the ACA Code of Ethics and I agree to ensure that the program named in this application abides by the code. I agree to restrict the use of the WVBEC approval number to the program named on this application, to provide WVBEC, upon request only, documentation of attendance and to keep a roster of attendees on file for a five-year period.

Signature of Contact Person

Date Signed

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Focus Areas

- A** **Human Growth and Development** – includes nature and needs of individuals at all developmental levels following psychological, sociological and physiological approaches. Also includes human behavior (normal and abnormal), personality theory, learning theory, dynamics of stress, and medical/functional implications of disability.
- B** **Social and Cultural Foundations** – includes studies of social change, ethnic groups, subcultures, mores, urban and rural societies, population patterns, use of leisure time, work, and differing life patterns.
- C** **Group Dynamics** – includes theories, practices, methods, dynamics, facilitative skills and supervised practice.
- D** **Life-style and Career Development** – includes vocational-choice theory, relationship between career choice and life-style, occupational and educational information, career decision-making processes, career development exploration, and placement techniques.
- E** **Individual Appraisal** - includes individual differences, methods of data gathering and interpretation, individual and group testing, and case study.
- F** **Research and Evaluation** – includes statistics, research design, research proposals, and evaluation.
- G** **Professional Responsibilities** – includes goals and objectives of counseling organizations, codes of ethics, legal considerations, standards of preparation, certification and licensing, advocacy, confidentiality, and the role identity of counselors.
- H** **Community Resources** – includes development and implementation of community resource references and materials for client referral.
- I** **Supervision** - includes the theory and practice of supervision with experiential components.
- J** **Counseling Theories** – includes a study of basic theories and principles of counseling and philosophic bases of the helping relationship.
- K** **Counseling Techniques** – includes individual counseling practices, methods, facilitative skills, and application of these skills.

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Profile Sheet for the Presenter/Trainer
(A Vita can be used in place of this form)

1. Name _____

2. Current Employment _____

a. Title _____

b. Place of Employment _____

c. Address _____

d. Date of Initial Employment _____

3. Educational Background

Undergraduate Degree _____ Major _____ Year _____
Institution _____

Graduate Degree _____ Major _____ Year _____
Institution _____

Graduate Degree _____ Major _____ Year _____
Institution _____

4. Special Training Relevant to Topic Area (s) Presented

5. Licenses and Certifications Held

6. Other pertinent information relating to Instructor/Trainer's background s it relates to providing this continuing education activity.

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Reminder

Continuing Education Certificates of Completion

All approved providers and providers of one-time offerings of continuing education for LPC must provide each participant with a certificate of completion with all of the following information:

- (1). The title and dates of the program and the Board's program approval number;
- (2). The name of the sponsoring agency or organization;
- (3). The name of the participant and the number of contact hours of continuing professional education earned by the participant;
- (4). The presenter (s) name and his or her credentials; and,
- (5). The signature of the presenter and/or the official representative of the sponsoring organization.

If approved for the 3 hour Ethics requirement for WV LPC include the following statement:

- (6) Ethical offering approved for required 3 ethical hours based on the ACA Code.

<p>Please print and familiarize yourself with Series 3, Continuing Education and Renewal Rule found on our website. Series 3 is our Legislative Rule governing our continuing education program.</p>
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