



# National Certified School Counselor

Application for counselors who hold the NCC credential

2012 APPLICATION



NATIONAL BOARD FOR  
**CERTIFIED COUNSELORS**™

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Greensboro, NC 27403-3660  
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### ***Professional Counseling Through Certification***

The National Board for Certified Counselors, Inc. (NBCC®) values diversity.  
There are no barriers to certification on the basis of gender, race, creed, age, sexual orientation or national origin.

NBCC® is a registered trade and service mark of the National Board for Certified Counselors, Inc.

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## About NBCC

The National Board for Certified Counselors (NBCC), a not-for-profit organization incorporated in 1982, provides national certifications for professional counselors. NBCC identifies counselors who voluntarily meet established requirements and maintains a registry of certificants. More than 48,000 professional counselors currently hold the National Certified Counselor (NCC) credential.

## About the NCSC Certification

The National Certified School Counselor (NCSC) certification was created as a result of the joint efforts of the American Counseling Association (ACA), the American School Counselor Association (ASCA) and the National Board for Certified Counselors (NBCC). The NCSC specialty certification identifies counselors who meet requirements based on research in school counseling. Those include knowledge, skills and competencies of the specialist in pre-K–12 school counseling. Certification as an NCSC serves the following purposes:

- Recognizing the master's-level pre-K–12 school counselor practitioner who is part of a program that promotes and enhances the learning process;
- Promoting the school counselor's identity, visibility and accountability on a national level;
- Identifying to the counseling profession and to the public those counselors who have met national professional school counseling standards;
- Advancing cooperation among school systems, professional organizations, and other credentialing and professional development agencies; and
- Encouraging the professional growth of school counselors.

Inappropriate use of NBCC certification designation marks and credentials is a violation of NBCC policies and applicable laws. Only those individuals credentialed by NBCC as National Certified School Counselors may use the NCSC designation.

## Counselor Educators

Counselor educators may be eligible to apply without documenting the required counseling supervision and school counseling work experience. To use this option, you must complete the NCSC application pages, submit a Professional Colleague Endorsement Form and transcript, and meet the educational requirements outlined in this application. You must also pass the National Certified School Counselor Examination (NCSCE).

To apply for the NCSC credential as a counselor educator, you must document three academic years of full-time employment in a school counselor preparatory program at a regionally accredited college or university. At least 50 percent of your assigned duties must involve training school counseling students and must include in-school supervision of school counseling students. Prior school counseling experience may be combined with current counselor education employment to meet the certification requirement.

To verify your experience, a letter from the department head of the graduate program in which you teach will be accepted instead of the normally required supervision and experience verification forms.

## Regional Accrediting Bodies

There are six regional accrediting bodies in the USA: Middle States Association of Colleges and Schools, New England Association of Schools and Colleges, North Central Association of Colleges and Schools, Northwest Association of Schools and Colleges, Southern Association of Colleges and Schools, and Western Association of Schools and Colleges.

If the university from which you earned your graduate degree was not accredited by one of these six bodies **at the time you earned your degree**, you are not eligible to apply. To check the accreditation of your university, visit [www.chea.org](http://www.chea.org) or verify with your university's registrar's office.

## Length of Certification and Annual Certification Fee

NCCs must adhere to the NBCC *Code of Ethics* and pay an annual certification fee for the NCC credential plus a fee for the NCSC. Credential holders are billed yearly and fees are due by the 15th day of their birth month. At the conclusion of each five-year cycle, NCC/NCSCs must be able to document having completed 100 clock hours of continuing education, 25 of which must be in the area of school counseling, or they can retake and pass the NCSCE.

If you determine you no longer want to maintain national certification, you must complete a Request to Relinquish Certification form.

## Contact Information

For personal assistance, please contact the NBCC Certification Department via e-mail ([certification@nbcc.org](mailto:certification@nbcc.org)) or telephone (336-547-0607).

## Certification Requirements

**Note: All references made in this application packet to schools or school counselors are to be understood as referring to either a pre-K–12 public or private school setting, or to counselors working in such a pre-K–12 public or private school setting.**

You must hold the National Certified Counselor (NCC) credential in order to use this application to apply for NCSC certification. If you have not yet applied for the NCC credential, but you meet the application requirements for both the NCC and NCSC credentials, then you may wish to complete the NCC/NCSC Combination Application (available online at [www.nbcc.org/specialties/NCSC](http://www.nbcc.org/specialties/NCSC)).

There are two NCSC application options available. One is for applicants who hold a state-level certification in school counseling issued by the state department of education, and another is for applicants who do not hold such state-level certification.

Those applicants who do not hold a school counseling certification for their state of residence are required to document more specific educational requirements than those who do. All applicants must document the same amount of postgraduate counseling supervision and school counseling work experience. A completed Professional Colleague Endorsement Form is also required for all applicants.

### For counselors who ARE NOT state certified/licensed as a school counselor

Applicants must meet all of the following:

- You must hold an advanced degree (master's or higher) with a major study in counseling. Your degree must have been completed at a regionally accredited college or university. A list of regional accrediting agencies appears in the General Information about NBCC and the NCSC Credential pages of this application packet. **Important: Degrees in education (teaching), special education or administration will not be accepted.**
- You must have completed coursework in each of the six required content areas (listed on the Coursework Requirement Form within this application packet), plus at least six semester/10 quarter hours of academic credit in counseling field experience(s). You must be able to document that you earned at least three semester/five quarter hours of credit in counseling field experience(s) in a school setting. All coursework must have been completed at a regionally accredited university.
- You must have accrued at least three academic years of postgraduate counseling supervision and work experience as a school counselor in a pre-K–12 school setting. This must be completed before you submit your application.

### For counselors who ARE state certified/licensed as a school counselor

Applicants must meet all of the following:

- You must hold an advanced degree (master's or higher) with a major study in counseling or in a mental health field. Your degree must have been completed at a regionally accredited college or university. A list of regional accrediting agencies appears in the General Information about NBCC and the NCSC Credential pages of this application packet.
- You must hold a school counselor credential issued by your state's department of education.
- You must have accrued at least three academic years of postgraduate counseling supervision and work experience as a school counselor in a pre-K–12 school setting. This must be completed before you submit your application.

## Educational Requirements

Please be aware that post-master's certificates, certificates of advanced study, or nondegree coursework will not be accepted in lieu of an actual advanced degree with a major study in counseling. If you have only add-on coursework in counseling, but no degree in counseling, you are not eligible to apply.

### Required for counselors who ARE NOT state certified/licensed as a school counselor

- A graduate degree with a major study in counseling, completed at a regionally accredited college or university. An advanced degree with "a major study in counseling" is defined as a master's degree or higher in which more than half (but no less than 24 semester/36 quarter hours) of the degree credits must be in at least six different coursework content areas required by NBCC, and the degree must include at least one supervised field experience in counseling. "Degree credits" are defined as credits earned within your degree program.
- 48 semester hours or 72 quarter hours of graduate-level coursework in counseling, all earned from a regionally accredited university, with at least one course in each of the following coursework areas: Cultural Diversity in Counseling, Group Work, Career and Lifestyle Development, Appraisal and the Fundamentals of School Counseling. Each course must have earned a minimum of two semester or three quarter hours of graduate-level credit. See the Coursework Requirement Form for details regarding these content areas. NBCC reserves the right to require course descriptions or syllabi if the title of a class does not sufficiently describe course content.
- A total of six semester or 10 quarter hours of graduate-level academic credit in counseling field experience(s), taken at a regionally accredited university. You must be able to document that at least three semester or five quarter hours of credit in field experience was completed in a school counseling setting.

### Required for counselors who ARE state certified/licensed as a school counselor

A graduate degree with a major study in counseling or in a mental health field, completed at a regionally accredited college or university. **Important: Degrees in education (teaching), special education or administration will not be accepted.**

Regarding the content area **Cultural Diversity in Counseling**: If you're an NCC who did not complete a graduate-level course that fulfills this requirement, you may substitute 45 clock hours of continuing education (CE) specific to cultural diversity. To use the substitution rule, you must submit a copy of each certificate of attendance or certificate of completion showing continuing education hours earned in the area of cultural diversity. The hours on the certificates must total 45 clock hours. Submit the copies of certificates along with your NCSC application packet.

*This substitution is only permitted of applicants for the NCSC credential. It does not extend to applicants for the NCC or any other credential.*

## School Counseling Supervision Requirements

### Required for ALL applicants

- Before completing this application, you must have completed three academic years of post-master's counseling supervision over a period of three academic years of post-master's school counseling work experience.
- Counseling supervision is defined as the time you spend with another master's level mental health professional, discussing matters such as how to improve your counseling skills, questions you have regarding your clients, how to build an effective counseling relationship, and receiving general feedback about your counseling.
- Supervision accrued prior to the date your counseling degree was conferred cannot be counted.
- Your counseling supervisor must hold a master's degree or higher in one of the following fields: counseling; psychology; psychiatry; marriage, couple and family therapy; social work; dance therapy; or art therapy. Counseling supervisors with only degrees in administration or teaching are not acceptable.
- The counseling supervisor should be someone with whom you meet on a regular basis to discuss your counseling caseload.
- Your counseling supervisor does not have to be your direct supervisor.
- Your counseling supervisor does not have to be licensed. He/she cannot be related to you.
- One of your two endorsers—either your counseling supervisor or your professional colleague—must hold either the NCC credential or state certification as a school counselor.
- Your counseling supervisor must document your time span and hours of postgraduate counseling supervision on the Counseling Supervisor Endorsement Form.
- The Counseling Supervisor Endorsement Form must bear the BLUE ink signature of your counseling supervisor. Faxed or photocopied signatures are not acceptable.

## School Counseling Experience Requirements

### Required for ALL applicants

- Before completing this application, you must have accrued a minimum of three academic years of full-time postgraduate work experience as a school counselor (or six years half-time).
- Experience accrued prior to the date your counseling degree was conferred cannot be counted.
- The time span and hours of your postgraduate school counseling work experience must be documented using the Verification of Experience Form included in this application packet.
- Your experience hours may be documented by either your counseling supervisor or by a human resources representative. The person who completes the Verification of Experience Form on your behalf does not have to be licensed or hold any specific degree.
- The Verification of Experience Form must bear the BLUE ink signature of your counseling supervisor or human resources representative. NBCC will not accept a faxed or photocopied signature.
- Former school counselors with at least three years of post-master's school counseling experience who are now in supervisory or administrative positions are encouraged to apply.

## Examination Requirement

### Required for ALL applicants

You must achieve a passing score on the National Certified School Counselor Examination (NCSCCE). There is no exemption from this requirement.

## Professional Practice Statement

As part of the NCSC application process, you are required to compose a Professional Practice Statement by providing a brief but complete and thoughtful response to four questions. While not assessed or scored, this will allow you to reflect on specific aspects of the school counseling profession. This statement will also provide ongoing descriptions of school counseling practice that will be compiled and researched to create a current assessment of national norms.

## About the NCSCE

The professional school counselor is required to make important decisions regarding the well-being of students and their family and community relations. The simulated problems on the National Certified School Counselor Examination (NCSCE) are designed to sample a broad area of competencies, not the recall of isolated facts. Therefore, the examination assesses problem-solving ability, including identifying, analyzing and addressing students' issues.

Each simulated problem will be divided into five to eight sections and classified as either information gathering (IG) or decision making (DM). The exam will cover the following areas:

- I. School Counseling Program Delivery
- II. Assessment and Career Development
- III. Program Administration and Professional Development
- IV. Counseling Process, Concepts and Applications
- V. Family-School Involvements

There is no study guide for the NCSC Exam. For more information on exam content and format, please see the "NCSCE Candidate Handbook" on NBCC's Web site at [www.nbcc.org/NCSCE](http://www.nbcc.org/NCSCE).

## Submitting Your Official Graduate Transcript

- A sealed, official copy of your graduate transcript(s), showing an advanced degree (master's degree or higher) is required. Certificates of advanced study or nondegree coursework will not be accepted in lieu of an actual degree in counseling. If your name has ever changed, be sure to list all other names on the first page of the application, where indicated.
- If you have taken relevant graduate-level coursework outside your degree that you wish us to review, you must also provide a sealed, official transcript for that coursework.
- If you'll be submitting your sealed graduate transcript separately from your application materials, please include a brief note with your application materials informing us that your transcript will arrive separately, and advise us of the date you ordered the transcript to be sent to NBCC.
- If submitting any transcript separately from your application materials, please arrange to have a sealed, official copy of your transcript(s) mailed to the following address:  
NBCC Certification Department  
3 Terrace Way  
Greensboro, NC 27403-3660

**Note: This is a different address than where you will send your main application materials.** Also, be aware that sending a transcript separately from your other application materials may slow the review of your application.

## Prior to Sending Your Application

1. Before you submit your application and documentation, make copies of all of your documents (except sealed transcript). All materials become the property of NBCC upon receipt. Copies are not released back to the applicant or to a third party.
2. Make sure all documents are completely filled out, and signed and dated where applicable. Ink signatures are required on the application and all forms.
3. Applications may NOT be submitted via fax. Send your application and payment to  
NBCC Certification Dept.  
P.O. Box 77699  
Greensboro, NC 27417-7699

**PLEASE NOTE THE DATE YOUR APPLICATION WAS MAILED.** If you haven't received correspondence regarding your application status after **nine weeks**, contact NBCC's Certification Department by e-mail ([certification@nbcc.org](mailto:certification@nbcc.org)) or by telephone (336-547-0607).

## Application and Examination Limits

NBCC holds applications open for either a two-year period or three unsuccessful attempts to pass the NCE, whichever comes first. If you are registered to test but do not sit for the exam, or take the exam and do not pass, a \$145 reregistration fee will be required. You will automatically receive reregistration forms for each examination for which you are eligible to sit.

## NBCC Ethics Policies and Procedures

NBCC applicants and certificants are responsible for ensuring that their behavior adheres to the standards identified in the *Code of Ethics*.

Prior to certification, all applicants must complete all portions of this application. This includes the Ethics Certification and Attestation and the Applicant Certification and Agreement Release Authorization sections which require applicants to disclose any previous legal, criminal or disciplinary matter. Application disclosures and other ethics matters are reviewed in accordance with NBCC procedures including the *Certification Eligibility Policy Relating to Criminal or Lesser Offense Convictions and Other Disciplinary Matters*.

The *Certification Eligibility Policy Relating to Criminal or Lesser Offense Convictions and Other Disciplinary Matters*, the *NBCC Ethics Case Procedures* and the *Code of Ethics* are available for your review on the NBCC Web site at [www.nbcc.org/ServiceCenter/Ethics](http://www.nbcc.org/ServiceCenter/Ethics).

## Endorsement Forms

The following forms are required for ALL applicants. One of your two endorsers must hold either the NCC credential or state certification as a school counselor.

**Professional Colleague Endorsement Form:** When preparing the Professional Colleague Endorsement Form, keep in mind the following points:

- The colleague who completes this form may not be related to you.
- The colleague who completes this form must meet the degree requirements stated on the form.
- The endorsement form must be completed in its entirety and signed in BLUE ink.
- The original form, signed in BLUE ink, must be mailed to NBCC.
- Both you and your colleague should keep a copy for the completed form for your records.
- The Professional Colleague Endorsement Form and the Counseling Supervisor Endorsement Form may not be completed by the same person.

### **Counseling Supervisor Endorsement Form**

When preparing the Counseling Supervisor Endorsement Form, keep in mind the following points:

- Counseling supervision hours are defined as time spent with another master's-level (at minimum) mental health professional discussing matters such as ways to improve your counseling skills and

how to build effective counseling relationships, answering questions regarding your clients, and receiving feedback about your counseling in general.

- Your counseling supervisor must meet the degree requirements stated on the form. The endorser does not have to be the chain-of-command person to whom you report.
- The endorsement form must be completed in its entirety, including the attestation paragraph (in italics) and the box containing your total clock hours of supervision.
- The Counseling Supervisor Endorsement Form and the Professional Colleague Endorsement Form may not be completed by the same person.
- Your counseling supervisor must complete the entire form and sign it in BLUE ink. Faxed and photocopied signatures will not be accepted. If a change is made on the form, your supervisor should strike through the error and initial the new information. Correction tape or liquid paper may not be used on the form.

You must document at least three academic years of counseling supervision from the date your graduate degree (master's or higher) in counseling or with a major study in counseling (as defined in this application) was conferred. Do not document any counseling supervision that occurred prior to graduation. This form is to be completed by the person with whom you regularly discuss your counseling cases. He or she must meet the requirements stated on the form.

### Verification of Experience Form

- Counseling work experience hours are defined as the time you spend counseling clients, making/reviewing case notes on your clients, viewing/listening to tapes of session and consulting with other mental health professionals, as well as other activities directly related to the counseling of your client caseload.
- You must document having completed at least three academic years of counseling work experience from the date your graduate degree (master's or higher) in counseling or with a major study in counseling (as defined in the Educational Requirements section of this application packet) was conferred. Do not document any work experience you accrued prior to graduation.
- If you have accrued counseling experience in more than one counseling position (including volunteer counseling work), you will need to submit a completed Verification of Experience Form from each work experience/location.
- The person who completes this form on your behalf does not have to hold any particular degree or license. This form can be completed by your counseling supervisor or by a human resources representative.

### When Will I Hear From NBCC?

Within three weeks of receiving your application, NBCC will send you a confirmation letter, which will include instructions for checking the status of your application online. If, after three weeks, you have not received your letter, check with your financial institution to verify that your payment has cleared before contacting NBCC. You can expect your review results to arrive in the mail approximately six to eight weeks after receiving the confirmation letter.

## Documentation Checklist

### Required for counselors who ARE NOT state certified/licensed as a school counselor

- Application
- Professional Colleague Endorsement Form
- Counseling Supervisor Endorsement Form
- Coursework Requirement Form
- Verification of Experience Form
- Professional Practice Statement
- Sealed official transcript(s)
- Special Examination Accommodations Request Form, if needed
- Payment Voucher and payment

### Required for counselors who ARE state certified/licensed as a school counselor

- Application
- Professional Colleague Endorsement Form
- Counseling Supervisor Endorsement Form
- Verification of Experience Form
- Copy of your school counselor credential issued by your state's department of education.
- Professional Practice Statement
- Sealed official transcript(s)
- Special Examination Accommodations Request Form, if needed
- Payment Voucher and payment

**Keep this packet for reference.**



12. What is your NBCC ID number (also known as a certification number)? 

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Have you applied previously for the National Certified School Counselor (NCSC) credential?  YES  NO

13. Special Accommodations:

Check this box if you are requesting **SPECIAL EXAM ACCOMMODATIONS**. Include the Special Exam Accommodations Request Form (included in this packet) and supporting documentation with your application.

14. Have you submitted materials to NBCC for a prereview of coursework?  YES  NO

15. List all professional licenses and credentials you currently hold.

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16. Ethics Certification and Attestation (You must respond to each statement.):

a. My record is free of any charge or complaint related to governmental, regulatory or professional organization.  YES  NO

b. My record is free of any charge or violation of any criminal or legal matter.  YES  NO

Note: Please provide a complete, detailed explanation of the circumstances related to “No” responses in items a or b above. You should also provide copies of the final disposition(s). Place the materials in a sealed envelope marked “ETHICS” and return with your application. Failure to provide required information will delay the processing of your application.

### **Applicant Certification and Agreement Release Authorization**

I understand that certification through NBCC depends on my fulfillment of all required criteria including compliance with the NBCC *Code of Ethics*. I certify that the information provided in this application is complete to the best of my knowledge.

I agree that NBCC has the right to communicate with any person or organization when reviewing this application or other submitted information, and I authorize the release of any information requested by NBCC to verify the accuracy of the information provided. I further agree that NBCC has the right to communicate with related organizations about this application.

I understand that NBCC certification is personal to me and may not be transferred to another individual or group. I understand that certification by NBCC does not create membership or other similar rights with NBCC including the right to use NBCC trademarks. I agree to comply with all NBCC policies, including my use of NBCC certification marks.

I understand that any certification granted by NBCC does not represent licensure or other authorization to practice business activities. I release NBCC from all liability and claims arising from any counseling activity.

I agree to report within sixty (60) days of my knowledge the following matters related to me:

- Any modifications to this application including any changes in contact information (e.g. home or business address, telephone or e-mail)
- Any charge or complaint related to a criminal or legal action
- Any charge or complaint by a regulatory or professional organization
- Any court or governmental matter related to my professional practice

I understand that professional biographical data and credential data is considered to be public information and will be made available in response to public inquiries. I agree that for research and statistical purposes, data related to my participation in NBCC certifications may be used. I understand that all application materials become the property of NBCC and will not be returned.

In the event that my credential has a special sanction, I agree to comply with all directives of the NBCC ethics office or the Board of Directors.

**Sign your legal name in BLUE ink.**

Be advised that your signature on this document constitutes your agreement with the above statements.

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Applicant's Signature

---

Date

**Applicant's Name:** \_\_\_\_\_

You must hold a current NCC credential, have a master's degree or higher in counseling or in a mental health field and have taken a separate course for graduate-level credit in each of the coursework areas listed below. Each course except field experience must have earned at least two semester or three quarter hours of graduate credit in each content area. The school counseling field experience(s) you list below must have earned a total of three semester or five quarter hours of graduate credit. All coursework must have been completed at a regionally accredited college or university. Please list the courses you have taken that correspond with each content area. A single course cannot fulfill two content areas (don't list the same course twice). To speed processing of your application, attach a course description if the name of a class does not clearly reflect course content.

Content Area	Date	Course Code	Course Title	Credit Hrs.
<p><b>1. Appraisal of Individuals</b></p> <p>includes studies that provide a broad understanding of group and individual educational and psychometric theories and approaches to appraisal; data and information gathering methods, validity and reliability; psychometric statistics; factors influencing appraisals; and use of appraisal results. Additionally, the specific ability to administer and interpret tests and inventories to assess abilities and interests, and to identify options, is important.</p>				
<p><b>2. Group Counseling</b></p> <p>includes studies that provide a broad understanding of group development, dynamics and counseling theories; group leadership styles; and basic and advanced group counseling methods and skills. Group counseling and guidance in classrooms is included as well as directed group activities appropriate for specific human development stages.</p>				
<p><b>3. Cultural Diversity in Counseling</b></p> <p>includes studies that provide a broad understanding of the nature, characteristics and needs of culturally diverse client groups seeking counseling; counseling models and techniques appropriate to various cultures; changes and trends in techniques appropriate to various cultures; changes and trends in a multicultural and diverse society; differing lifestyles; and major societal concerns within diverse populations.</p> <p>Candidates who lack an academic course in Cultural Diversity in Counseling may substitute 45 clock hours of continuing education specific to this subject area. (See Overview of NCSC Requirements section of this application.) There is no substitution permitted in any other content area.</p>				
<p><b>4. Career Development</b></p> <p>includes studies that provide counselors with a broad understanding of career development theories; occupational and educational information sources and systems; career counseling, guidance and education; career decision-making; and career development program planning, resources and effectiveness evaluation.</p>				
<p><b>5. Fundamentals of School Counseling</b></p> <p>includes a study of the delivery systems used by school counselors to conduct group activities, counsel clients, test programs and manage school counseling services. Student services such as educational programming, precollege counseling, career development, testing, and social and emotional counseling are components of this area of study.</p>				
<p><b>6. Practicum/Internship (three semester/five quarter hours required)</b></p> <p>refers to supervised counseling experience in a school setting. The practicum/ internship must have been taken through a regionally accredited college or university for graduate credit.</p>				

**For counselors who ARE NOT state certified/licensed as a school counselor**

**Coursework Requirement Form •**



Applicant's Name: \_\_\_\_\_ NCC Number: \_\_\_\_\_

**Professional Colleague Degree Requirement:**

All endorsers must hold a master's degree or higher in counseling; psychology; psychiatry; marriage, couple and family therapy; social work; dance therapy; or art therapy. Endorsers are not required to be licensed and cannot be related to the applicant. A professional colleague who does not meet these criteria must return this form to the applicant so another can be asked for this endorsement.

**To the National Board for Certified Counselors:**

*I have been professionally acquainted with the above-named applicant for \_\_\_\_ years \_\_\_\_ months. I am not related to this individual either by birth or by marriage. To the best of my knowledge, this applicant is in good standing in the profession, and I recommend him/her for certification through NBCC.*

**Professional Colleague Contact and Degree Information**

_____ Signature of Colleague ( <b>BLUE</b> ink required)	_____ Date
_____ Colleague's Name (please print)	_____ Colleague's Title
_____ Business Address	_____ Degree and Major (e.g., "M.A.-Counseling")
_____ City/State/ZIP Code	_____ Telephone With Area Code
_____ Profession	_____ Professional Certification or License (if credentialed)
_____ State or Certifying Organization (if credentialed)	_____ E-mail

**This form with an original BLUE ink signature must be mailed to NBCC by the applicant.  
Faxed or photocopied signatures will not be accepted.  
The applicant and colleague should retain copies for their records.**

Feel free to offer other comments on the back of this sheet, if necessary.  
After completing this form, please return it to the applicant.

**Professional Colleague Endorsement Form**



Applicant's Name: \_\_\_\_\_ NCC Number: \_\_\_\_\_

**Counseling Supervisor Degree Requirement:**

All endorsers must hold a master's degree or higher in counseling; psychology; psychiatry; marriage, couple and family therapy; social work; dance therapy; or art therapy. Endorsers are not required to be licensed and cannot be related to the applicant. A counseling supervisor who does not meet these criteria must return this form to the applicant so another counseling supervisor can be asked for this endorsement.

**Counseling Supervisor Attestation**

**To the National Board for Certified Counselors:**

*I have been professionally acquainted with the above-named applicant for \_\_\_\_ years \_\_\_\_ months. I am not related to this individual either by birth or by marriage. To the best of my knowledge, this applicant is in good standing in the profession and has demonstrated effective counseling skills with clients while under my supervision. I recommend him/her for certification through NBCC.*

*I verify that this applicant for certification has met with me for \_\_\_\_\_ hours of direct supervision regarding his/her counseling cases from \_\_\_\_\_ (mm/yyyy) to \_\_\_\_\_ (mm/yyyy).*

\_\_\_\_\_  
Applicant's Position/Title

\_\_\_\_\_  
Name of Agency/Institution

**Counseling Supervisor Contact and Degree Information**

\_\_\_\_\_  
Signature of Counseling Supervisor (BLUE ink required)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Counseling Supervisor's Name (please print)

\_\_\_\_\_  
Counseling Supervisor's Title

\_\_\_\_\_  
Business Address

\_\_\_\_\_  
Degree and Major ( e.g., "M.A.-Counseling")

\_\_\_\_\_  
City/State/ZIP Code

\_\_\_\_\_  
Telephone With Area Code

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
Professional Certification or License (if credentialed)

\_\_\_\_\_  
State or Certifying Organization (if credentialed)

\_\_\_\_\_  
Profession

**This form with an original BLUE ink signature must be mailed to NBCC by the applicant. Faxed or photocopied signatures are not acceptable. The applicant and supervisor should retain copies for their records.**

Feel free to offer other comments on the back of this sheet, if necessary.



Applicant's Name: \_\_\_\_\_ NCC Number: \_\_\_\_\_

I am applying to the National Board for Certified Counselors, Inc. for the National Certified School Counselors (NCSC) credential. I am required to provide documentation of three years of full-time counseling experience, or six years of half-time school counseling experience after the date my counseling master's degree was conferred. Please complete the information below and return the form to me. My application cannot be processed without this form.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**INFORMATION BELOW TO BE COMPLETED BY EXPERIENCE VERIFIER  
(not applicant)**

Please complete all the information below. If you make an error, do not use correction tape or liquid paper. Mark through the error, write the correct information above or beside it, and initial the correction.

I verify that the applicant named above worked as a school counselor from \_\_\_\_\_ (mm/yyyy) to \_\_\_\_\_ (mm/yyyy). I verify that the applicant spent \_\_\_\_\_ hours per week working as a school counselor.

**EXPERIENCE VERIFIER CONTACT INFORMATION**

**All information requested below is required.**

1. Verifier's Name (please print): \_\_\_\_\_
2. Name of Agency/Institution (where you worked with the applicant): \_\_\_\_\_  
\_\_\_\_\_
3. Title at Agency/Institution (where you worked with applicant): \_\_\_\_\_
4. Current Telephone With Area Code: \_\_\_\_\_
5. E-mail: \_\_\_\_\_

\_\_\_\_\_  
Signature of Experience Verifier (**BLUE** ink required)

\_\_\_\_\_  
Date

**After completing this form, please return it to the applicant.**

**Verification of Experience Form**



Applicant's Name: \_\_\_\_\_ NCC Number: \_\_\_\_\_

As part of the NCSC application process, please compose a Professional Practice Statement by providing a brief but complete and thoughtful response to the four questions below. While not assessed or scored, this will allow you to reflect on specific aspects of the school counseling profession. This statement will also provide ongoing descriptions of school counseling practice that will be compiled and researched to create a current assessment of national norms. Your responses must be typed or clearly printed. Each page should include your name and NBCC ID number.

1. Explain the reason you became a school counselor and your personal philosophy of school counseling.
2. Describe how you incorporate your personal philosophy of school counseling into daily practice.
3. Describe how you use nationally recognized standards for school counseling programs.
4. Describe how you evaluate your effectiveness as it relates to student success in academic, career or personal/social development.

## April 21, 2012

STATE	CITY	SITE #	STATE	CITY	SITE #	STATE	CITY	SITE #
Alabama	Birmingham	0121	Louisiana	New Orleans	1811	Oklahoma	Norman	3601
Alaska	Anchorage	0201		Shreveport	1831	Oregon	Ashland	3701
Arizona	Tempe	0311	Maine	Portland	1901		Portland	3731
	Tucson	0321	Maryland	Baltimore	2001	Pennsylvania	Pittsburgh	3821
Arkansas	Jonesboro	0411	Massachusetts	Springfield	2111		Scranton	3831
California	Los Angeles	0501	Michigan	East Lansing	2201	Rhode Island	Kingston	3901
	Sacramento	0521	Minnesota	St. Paul	2311	South Carolina	Columbia	4001
Colorado	Denver	0601	Mississippi	Jackson	2401	South Dakota	Rapid City	4111
	Grand Junction	0611	Missouri	St. Louis	2511	Tennessee	Knoxville	4211
	Pueblo	0621		Springfield	2521		Nashville	4231
Connecticut	Hartford	0701	Montana	Bozeman	2601	Texas	Houston	4311
Delaware	Dover	0801	Nebraska	Omaha	2711		Lubbock	4321
Florida	Tallahassee	0931	Nevada	Reno	2811	Utah	Cedar City	4401
	New Port Richey	0941	New Hampshire	Manchester	2901	Vermont	Burlington	4501
Georgia	Macon	1011	New Jersey	Edison	3001	Virginia	Charlottesville	4601
Hawaii	Honolulu	1101	New Mexico	Albuquerque	3101	Washington	Seattle	4701
Idaho	Caldwell	1201	New York	New York City	3211		Cheney	4711
					Rochester	3221	West Virginia	South Charleston
Illinois	Matoon	1301	North Carolina	Greensboro	3321	Wisconsin	Oshkosh	4911
	Chicago	1311		Wilmington	3331	Wyoming	Laramie	5011
Indiana	Indianapolis	1401	North Dakota	Bismarck	3401	Washington, DC		5101
Iowa	Des Moines	1501	Ohio	Columbus	3501	Puerto Rico	San Juan	5211
Kansas	Emporia	1601				International		5301
Kentucky	Lexington	1711						

## October 13, 2012

STATE	CITY	SITE #	STATE	CITY	SITE #	STATE	CITY	SITE #
Alabama	Birmingham	0122	Louisiana	Baton Rouge	1802	Oklahoma	Tahlequah	3612
Alaska	Fairbanks	0212		Monroe	1822	Oregon	Eugene	3712
Arizona	Flagstaff	0302	Maine	Portland	1902		LaGrande	3722
	Tempe	0312	Maryland	Baltimore	2002	Pennsylvania	Erie	3802
Arkansas	Conway	0402	Massachusetts	Boston	2102		Harrisburg	3812
California	San Francisco	0512	Michigan	Rochester	2212	Rhode Island	Kingston	3902
	San Diego	0532	Minnesota	Duluth	2302	South Carolina	Columbia	4002
Colorado	Denver	0602	Mississippi	Mississippi State	2412	South Dakota	Brookings	4102
	Grand Junction	0612	Missouri	Kansas City	2502	Tennessee	Chattanooga	4202
	Pueblo	0622		St. Louis	2512		Memphis	4222
Connecticut	Hartford	0702	Montana	Helena	2612	Texas	Dallas	4302
Delaware	Dover	0802	Nebraska	Kearney	2702		San Antonio	4332
Florida	Ft. Lauderdale	0902	Nevada	Las Vegas	2802	Utah	Salt Lake City	4412
	Gainesville	0912	New Hampshire	Manchester	2902	Vermont	Burlington	4502
Georgia	Atlanta	1002	New Jersey	Trenton	3012	Virginia	Williamsburg	4612
Hawaii	Honolulu	1102	New Mexico	Las Cruces	3112	Washington	Seattle	4702
Idaho	Pocatello	1212	New York	Albany	3202		Cheney	4712
					New York City	3212		Vancouver
Illinois	Chicago	1312		Syracuse	3232	West Virginia	Morgantown	4812
	Springfield	1322	North Carolina	Charlotte	3312	Wisconsin	Milwaukee	4902
Indiana	South Bend	1412		Greensboro	3322	Wyoming	Casper	5002
Iowa	Des Moines	1502	North Dakota	Fargo	3412	Washington, DC		5102
Kansas	Wichita	1612	Ohio	Columbus	3502	Puerto Rico	Ponce	5202
Kentucky	Bowling Green	1702				International		5302



Use this form if you are requesting special accommodations for the examination. All requests are reviewed individually and are subject to NBCC approval.

Applicant's Name: \_\_\_\_\_ NCC Number: \_\_\_\_\_

**THERE IS NO EXTRA CHARGE FOR THESE ARRANGEMENTS.**

**Candidates With Disabilities**

Please identify briefly the nature of your disability. (Attach letterhead documentation to include diagnosis and recommended accommodations by a qualified professional.) Specify the special accommodations and/or arrangements you will need to complete the NCSCE. Documentation may not be more than five years old.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*I certify that this information is correct. I have attached the required documentation.*

\_\_\_\_\_  
Applicant's Signature Date

**Candidates for Whom English Is a Second Language**

*I am requesting two additional hours of exam time and/or permission to bring a nonelectronic, word-to-word translation dictionary due to English as a second language (ESL). I have attached documentation from my graduate program showing that I received special accommodations due to ESL while in school.*

\_\_\_\_\_  
Applicant's Signature Date

**Note:** If you studied in another language, we will verify the international degree equivalency evaluation you submitted as part of this application.

**Request for Special Exam Date**

*I have attached a letter from my clergyperson verifying that I cannot participate in the examination on Saturday for religious reasons. Please contact me to arrange a special administration of the NCSCE on the Friday immediately preceding or the Monday immediately following the scheduled administration date.*

\_\_\_\_\_  
Applicant's Signature Date

**Request for International Exam Location**

*Please contact me to arrange for testing at an international location.*

\_\_\_\_\_  
Applicant's Signature Date

**Note:** Cancellations of special exam accommodations must be made at least seven business days before the exam date.

