



Registration Form for the National Clinical Mental Health Counseling Examination (NCMHCE)

for professional counselors serving the military health systems.

Important Examination Registration Information

- This registration form is only for individuals who wish to take the NCMHCE for potential employment within the military... The registration fee is \$195... This examination fee is nonrefundable and nontransferable.

- NBCC will accept passing exam scores resulting from this registration to be used to apply for national certification... Please copy this completed registration for your records.

Materials Required for Registration

- Your completed registration form with original ink signature... A photocopy of your state license... Note: Associate-level, limited, provisional or intern licensure is not sufficient for this registration.

1. First Name [grid] MI: [] Last Name: [grid] Previous Names (please attach a separate sheet if necessary): [grid] 2. Social Security Number: []-[]-[] 3. Street Address: [grid] City/State/ZIP/Country: [grid] 4. Evening Telephone: []-[] Day Telephone: []-[] 5. E-mail: [grid] 6. Gender: [] M [] F 7. Date of Birth (MM/DD/YYYY): []-[]-[] 8. Ethnic Origin (optional; used for statistical purposes only): [] African American [] Native American [] Asian [] Hispanic/Latino [] Multiracial [] Native Hawaiian [] Caucasian [] Other 9. Are you a National Certified Counselor (NCC)? [] Yes [] NO If yes, what is your NBCC ID Number? _____ 10. License issued by what state? _____ License Number? _____ Expiration Date: _____

All of the above must be received before you will be allowed to schedule an examination date. Please mail materials to: NBCC Military Examinee Registration P.O. Box 7407 Greensboro, NC 27417-0407. Faxed registration forms cannot be accepted.

I understand and agree that I am registering to take the NCMHCE only. I acknowledge that this exam registration is not a part of any NBCC national certification or state licensure process. I will not earn a credential upon completion of the exam taken through this registration. I recognize that acceptance of these scores for licensure is subject to individual state regulatory boards. Furthermore, I understand that passage of this examination does not guarantee that I will be accepted for an employment position with the federal government or private employers. I accept that employment decisions are made by the employer and information regarding my qualifications for a position must be directed to the appropriate contact person as listed in the job announcement. All of the information provided on this form is accurate and complete to the best of my knowledge. I agree to abide by all NBCC policies, procedures and agreements concerning the NCMHCE.

Signature: _____ Date: _____

OFFICE USE ONLY: REF.#1: _____ BATCH #1: _____ DATE: _____ AMOUNT: _____

Additional Information

- Registration is required. Please allow four weeks for processing time. To check the status of your registration, please send an e-mail to militaryexaminee@nbcc.org. Phone calls delay registration processing.
- Testing is normally the first two full weeks of each month, Monday through Saturday at 9:00 a.m. and 1:30 p.m., with four hours allowed for the exam. However, only certain sites offer Saturday testing. You should contact NBCC's testing partner Applied Measurement Professionals, Inc. (AMP) for particular locations and dates. Candidates are scheduled on a first-come-first-served basis. You are able to test at any of the more than 170 AMP assessment centers across the United States. If you need to test outside the U.S., please contact NBCC at militaryexaminee@nbcc.org.
- You may reschedule an examination appointment **one time** at no charge by contacting AMP. If you need to reschedule, you must do so at least three business days prior to the scheduled testing session. **Please note that your rescheduled exam date must be within your original six-month eligibility period.**
- **Special accommodation requests** should be sent with your registration form along with supporting documentation from a qualified professional. Special accommodation approvals are good for one year. After one year, you will need to submit a new request. If you are testing with approved special accommodations, please schedule your test via the toll-free number to ensure your accommodations are confirmed.
- At the conclusion of the testing session, you will receive an exam score report. If an additional examination report is needed, please download a score verification form at www.nbcc.org/Exams/ScoreVerification.

2011/2012 Examination Schedule

October 2011	10/03 - 10/15
November 2011	11/07 - 11/19
December 2011	12/05 - 12/17
January 2012	01/02 - 01/14
February 2012	02/06 - 02/18
March 2012	03/05 - 03/17
April 2012	04/02 - 04/07
April 2012	04/17 - 04/21
May 2012	05/07 - 05/19
June 2012	06/04 - 06/16
July 2012	07/02 - 07/14
August 2012	08/06 - 08/18
September 2012	09/04 - 09/15
October 2012	10/01 - 10/13
November 2012	11/05 - 11/17
December 2012	12/03 - 12/15

Exam dates should be scheduled through AMP's Web site or by calling AMP's toll-free customer service line **after receiving confirmation from NBCC that your registration has been processed.**

AMP Telephone Number: 888-519-9901

AMP Web Site: www.goAMP.com

Method of Payment for the Registration Fee

Amount to be billed: \$100 (fee for NCCs)
 \$195 (fee for Non-NCCs)

Payment Type: Check or money order- made payable to NBCC
 Credit Card

Card Type: VISA MasterCard American Express

Name on Card:

Acct. #: Exp. Date: /

Verification Code Numbers (from back of card):

Cardholder Signature: _____ Date: _____

Daytime Telephone: _____ Evening Telephone: _____

Mail payment to:
NBCC Military Examinee Registration
P.O. Box 7407
Greensboro, NC 27417-0407