

**Health Regulation and Licensing
 Administration**

COURSEWORK COMPLETION FORM

Dear Applicant: If you are applying for LPC or LGPC licensure, this form must be completed and submitted with your application materials. For a complete list of documents required for your application, please visit: <https://doh.dc.gov/publication/application-check-list-professional-counseling-and-graduate-professional-counseling>.

Instructions: Please provide the information requested below for each required graduate course. Your sealed official transcript(s) submitted with your application for licensure must match the information provided below. Upon Board request, you may be required to provide course descriptions.

Required Course	School Name	Year Completed	Course Title	Course ID	Semester Hours
Counseling Theory Practice					
Human Growth & Development					
Lifestyle & Career Development					
Group Counseling					
Appraisal, Assessment, & Testing of Individuals					
Principles of Etiology, Diagnosis, Treatment, Planning & Prevention of Mental & Emotional Disorder & Dysfunctional Behavior					

Required Course	School Name	Year Completed	Course Title	Course ID	Semester Hours
Social & Cultural Foundations including Multicultural Counseling					
Marriage and Family Counseling					
Research & Program Evaluation					
Professional Orientation and Ethics					
700 Hr. Counseling Practicum or Internship					

ALL APPLICANTS PLEASE ANSWER

Was your program accredited by the Council for Accreditation of Counseling and Related Education Programs (CACREP) at the time of graduation? ___ YES ___ NO*

***If you answered NO, please complete and submit the Internship/Practicum Program form with your application located at: <https://doh.dc.gov/node/1172601>.**