

## Graduate Professional Counselor License (LGPC)

### NEW LICENSE APPLICATION

#### CHECKLIST- By EXAMINATION

**IMPORTANT:**

To expedite the processing of your NEW LICENSE APPLICATION be sure to follow the instructions carefully before submitting your ONLINE application portal. It is important to submit in all the required supporting documents listed below based on the method by which you are applying:

| CHECKLIST ITEMS                                                                                                                                                                                                                                                                                                                                                                                              | SUBMISSION METHODS                        | Check Mark               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|--------------------------|
| <b>1. All Pages of Application</b>                                                                                                                                                                                                                                                                                                                                                                           |                                           |                          |
| All pages of the <a href="#">online application</a> must be completed and submitted.                                                                                                                                                                                                                                                                                                                         | ONLINE                                    | <input type="checkbox"/> |
| <b>2. Demographic Information</b>                                                                                                                                                                                                                                                                                                                                                                            |                                           |                          |
| The demographic information (i.e., name, date of birth, address, etc.) provided by the application is true and correct and matches what is contained in the electronic licensing system.                                                                                                                                                                                                                     | ONLINE                                    | <input type="checkbox"/> |
| <b>3. Social Security Number</b>                                                                                                                                                                                                                                                                                                                                                                             |                                           |                          |
| If you do not have social security number then you must submit a <u>Sworn Affidavit</u> , under penalty of perjury, stating that you do not have a social security number AND one of the following: a copy of a Certificate of Citizenship or Naturalization; a Resident Alien Card; a valid foreign passport with a visa; or a work permit card from the Department of Homeland Security (I-766 or I-688B). | ONLINE                                    | <input type="checkbox"/> |
| <b>4. One (1) Recent Passport Type Photo (2x2 size) of the Applicant's Face</b>                                                                                                                                                                                                                                                                                                                              |                                           |                          |
| The photo must be original and cannot be a computer-generated copy, or paper copy.                                                                                                                                                                                                                                                                                                                           | ONLINE                                    | <input type="checkbox"/> |
| <b>5. One (1) photocopy of a current government issued</b>                                                                                                                                                                                                                                                                                                                                                   |                                           |                          |
| This can be a driver's license or passport.                                                                                                                                                                                                                                                                                                                                                                  | ONLINE                                    | <input type="checkbox"/> |
| <b>6. Name Change Documents</b>                                                                                                                                                                                                                                                                                                                                                                              |                                           |                          |
| Applicant must provide a copy of a legal name change document for EACH time that it has changed. Acceptable documents are <u>marriage certificates</u> , <u>divorce decrees</u> or <u>court orders</u> .                                                                                                                                                                                                     | ONLINE                                    | <input type="checkbox"/> |
| <b>7. Official score report from National Exam (if applicable)</b>                                                                                                                                                                                                                                                                                                                                           |                                           |                          |
| Examination score must be transferred <b>from the examining body</b> . This can be submitted via electronically from the <a href="#">NBCC</a> .                                                                                                                                                                                                                                                              | ELECTRONICALLY<br>(By Examining Body)     | <input type="checkbox"/> |
| <b>9. Internship/practicum form</b>                                                                                                                                                                                                                                                                                                                                                                          |                                           |                          |
| Complete this form if your program was not CACREP accredited. This form can be sent <b>directly from the school</b> to the board at <a href="mailto:dclgpc@dc.gov">dclgpc@dc.gov</a> .                                                                                                                                                                                                                       | E-MAIL or MAIL<br>(Preferably via E-Mail) | <input type="checkbox"/> |

| CHECKLIST ITEMS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | SUBMISSION METHODS                                                                                                 | Check Mark               |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------|
| <b>10. Official Sealed Transcript</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                    |                          |
| <p>Master's degree or higher in counseling or related field with a <b>minimum of 48 hours</b> (see <a href="#">LGPC regulations</a> for complete list of acceptable programs).</p> <ul style="list-style-type: none"> <li><b>Send Via Official Email or Mail:</b> An official electronic transcript is acceptable from the issuing institution/agency if <b>directly sent from the school</b> to the Board (<a href="mailto:dclgpc@dc.gov">dclgpc@dc.gov</a>) via their secure electronic network or mail it to DC Board of Professional Counseling, 899 North Capitol Street, NE, 1<sup>st</sup> Floor, Washington DC 20002.</li> </ul> <p><b>Foreign Educated Only:</b> Transcripts from a foreign school in a foreign language must have evaluated by World Education Services (WES).</p> | <b>E-MAIL or MAIL</b><br><i>(Preferably via E-Mail and must come directly from the school/issuing institution)</i> | <input type="checkbox"/> |
| <b>11. Coursework Completion Form</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                    |                          |
| The <a href="#">Coursework Completion Form</a> is a required document for all applicants applying by Examination. All courses must be completed during graduate program.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <b>ONLINE</b>                                                                                                      | <input type="checkbox"/> |
| <b>12. Criminal Background Check (CBC)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                    |                          |
| <p>If a recent CBC (fingerprint) already exists in the system within 2 years, no new CBC is required. All other applicants must re-do their CBC with the online application. If answering <b>"YES"</b> to any of the screening questions, an explanation of the incident(s) must be provided by the applicant.</p> <p>For information, please visit the website: <a href="https://dchealth.dc.gov/node/120532">https://dchealth.dc.gov/node/120532</a>. <b>{\$50 payment must be paid via online with the application. A link will be provided to you afterward via email}.</b></p>                                                                                                                                                                                                          | <b>ONLINE</b>                                                                                                      | <input type="checkbox"/> |
| <b>13. Screening Question Responses</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                    |                          |
| Applicants must answer all questions, including <b>Clean Hands</b> . If answered <b>"Yes"</b> , the applicant must also submit any and <u>all relevant documents</u> related to the reason for the <b>"Yes"</b> answer (e.g., Court Records, Monitoring Agreements, Licensure Orders, etc.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>ONLINE</b>                                                                                                      | <input type="checkbox"/> |
| <b>14. Vaccination</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                    |                          |
| Please submit a new entry via the Attestation portal at <a href="https://doh.force.com/ver/s/vaccinereporting">https://doh.force.com/ver/s/vaccinereporting</a>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>ONLINE</b>                                                                                                      | <input type="checkbox"/> |
| <b>15. National Practitioner Databank (NPDB) Self Query Report</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                    |                          |
| The Self-Query Report must be requested from the NDPB ( <a href="https://www.npdb.hrsa.gov/ext/selfquery/SQHome.jsp">https://www.npdb.hrsa.gov/ext/selfquery/SQHome.jsp</a> ) no more than thirty (30) days prior to submission of the application.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>ONLINE</b>                                                                                                      | <input type="checkbox"/> |
| <b>16. Payment (Fee)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                    |                          |
| <b>\$230 (USD)</b> for Application and License Fee.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>ONLINE</b>                                                                                                      | <input type="checkbox"/> |