



COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH  
PROGRAM SUPPORT BUREAU  
WORKFORCE EDUCATION AND TRAINING (WET) DIVISION

**LICENSURE PREPARATION PROGRAM (LPP)  
MARRIAGE AND FAMILY THERAPIST (MFT) CLINICAL VIGNETTE EXAMINATION**

The WET Division announces a limited number of slots available at a discounted rate for the MHSA WET-funded Licensure Preparation Program (LPP) to qualified public mental health staff (DMH-operated and DMH-contracted programs).

The following study package is available through the Association of Advanced Training in Behavioral Sciences (AATBS):

**AATBS MFT CLINICAL VIGNETTE COMBO PACKAGE INCLUDES:**

- Clinical Vignette Strategies Volume
- 2 Comprehensive Study Volumes
- CaseMASTER: 226 questions associated with 39 different Exhibits with 3 months access time
- Expert Phone Consultation: one-on-one assistance available with exam experts
- Live 1-Day Workshop: 7 hours of instruction covering exam content and strategies

Visit [www.aatbs.com](http://www.aatbs.com) for more details about the package.

**Retail Value: \$525      MHSA WET Participant Price: \$50**

**MFT Clinical Vignette Workshop Dates and Location**

**Date:** Sunday, April 6, 2014  
**Time:** 9:00 am – 5:00 pm  
**Location:** Embassy Suites LAX, 1440 E. Imperial Ave., El Segundo, CA 90245

**APPLICATION DEADLINE:** April 1, 2014 or when slots are filled. Space is limited.

**\*Attendance to the Live 1-Day Workshop is MANDATORY for all MHSA-WET Participants\***

**ELIGIBILITY:**

- Must be in good standing with current employer; no disciplinary action within the last year
- Must have successfully completed the MFT Standard Written Examination
- **APPROVED BY THE LICENSING BOARD AND RECEIVED THEIR ELIGIBILITY NOTICE TO TAKE THE LICENSURE EXAMINATION**
- Currently providing a minimum of 65% of their time in direct clinical services in public mental health
- Has not previously participated in the MHSA WET-funded LPP for the MFT Clinical Vignette Examination; this package is available one time per individual

**PRIORITY WILL BE GIVEN TO CLINICIANS WHO MEET AT LEAST ONE OF THE FOLLOWING CRITERIA:**

- If applicable, license-waivered status with employer to expire within 12 months
- Previous attempt(s) at passing the MFT Clinical Vignette Examination

**INSTRUCTIONS:**

1. Please **scroll down** for the application form, which must be completed and faxed to Angelica Fuentes at (213) 252-8775. ***In addition, please attach the necessary documentation (i.e. eligibility letter or web print out) indicating board approval to take the exam.*** Applications will be accepted until **April 1, 2014**, or when capacity is reached.
2. Once approved, an e-mail confirmation will be sent to participants.
3. Participants will be given a phone number to register and pay the non-refundable fee of \$50 by VISA, MasterCard or American Express to AATBS.
4. AATBS will register participants for the requested workshop and mail the study package to the address provided on the application when payment is received.

**All applications are reviewed. Submission of application does not guarantee approval.**

CONTACT: Angelica Fuentes, LCSW, E-mail: [afuentes@dmh.lacounty.gov](mailto:afuentes@dmh.lacounty.gov)



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**MARRIAGE AND FAMILY THERAPIST (MFT) CLINICAL VIGNETTE EXAMINATION**

*Print Only*

TITLE: LPP MFT Clinical Vignette Examination		DATE(S): Sunday, April 6, 2014	
FIRST NAME:		LAST NAME:	
JOB TITLE:	DISCIPLINE:	ETHNICITY: <i>(optional)</i>	
AGENCY:		PROGRAM:	
MAILING ADDRESS FOR STUDY PACKAGE:			
CITY:		STATE:	ZIP:
PHONE #:		E-MAIL: <i>(required for information)</i>	
LANGUAGE(S) FLUENCY: <i>(other than English)</i>			

Service area of employment:     1      2      3      4      5      6      7      8

Have you previously taken the MFT Clinical Vignette Examination?                             Yes                              No

Is your license-waivered agreement with your employer expiring within 12 months?     Yes                              No

\_\_\_\_\_ is currently providing a minimum of 65% of his/her time in direct clinical services in public mental health; is in good standing with his/her employer with no disciplinary action within the last 12 months; successfully completed the required supervision hours; and is approved by the board to take the MFT Clinical Vignette Examination.

\_\_\_\_\_ Agrees to the following terms and conditions:

- \_\_\_\_\_ *Name of Applicant (Print)*
- Complete the licensure preparation program by attending the mandatory workshop and participating in all offerings of the program.
  - Provide the WET Division examination results and any other information relating to employment and promotional status.
  - Understand that the mandatory workshop is to be taken on his/her own time.

**The WET Division will provide participants with the registration contact information upon approval. Participants must register and pay the non-refundable discounted fee of \$50 by VISA, MasterCard or American Express.**

Return Application to:  
 Angelica Fuentes, LCSW  
 WET Training Coordinator  
 Fax: (213)252-8776  
 E-mail: [afuentes@dmh.lacounty.gov](mailto:afuentes@dmh.lacounty.gov)

\_\_\_\_\_  
Signature of Applicant                             Date

\_\_\_\_\_  
Signature of Supervisor                             Date

\_\_\_\_\_  
Name of Supervisor                             Supervisor's Phone #

\_\_\_\_\_  
Supervisor's E-mail Address