

APPRAISAL PRIVILEGE APPLICATION

(please print or type)

NAME (_____) LPC Lic. # (_____)

MAILING ADDRESS (_____)

SS# (_____) PHONE (_____)

Please indicate below how you meet the requirements for the privilege to utilize formal appraisal instruments in the appraisal of individuals.

STATISTICS

Course: (_____)

In support: Transcript only Catalogue Letter Other

Comments: (_____)

(_____)

(_____)

SAMPLING THEORY

Course: (_____)

In support: Transcript only Catalogue Letter Other

Comments: (_____)

(_____)

(_____)

TEST CONSTRUCTION

Course: (_____)

In support: Transcript only Catalogue Letter Other

Comments: (_____)

(_____)

(_____)

Course: (_____)

In support: Transcript only Catalogue Letter Other

Comments: (_____)

(_____)

(_____)

INDIVIDUAL DIFFERENCES

Course:(_____)

In support: Transcript only Catalogue Letter Other

Comments:(_____)

(_____)

(_____)

PRACTICUM

Course: (_____)

In support: Transcript only Catalogue Letter Other

Comments: (_____)

(_____)

(_____)

SUPERVISED PRACTICE

Course:(_____)

In support: Transcript only Catalogue Letter Other

Comments: (_____)

(_____)

(_____)

I hereby affirm that I am the person referred to in this application for the privilege to utilize formal appraisal instruments in the appraisal of individuals. All of the foregoing statements and enclosures are true in every respect. Should I furnish any false information in this application, I hereby agree that such act shall constitute cause for denial, suspension, or revocation of such privilege and/or of the license to practice mental health counseling in the State of Louisiana.

The Board of Examiners reserves the right to secure further evidence that it deems reasonable and proper from the sources above.

Signature of Applicant (_____) Date (_____)

APPLICATION CHECKLIST

- Licensed professional counselor
- Transcript on file with the Board
- Other supporting evidence on file with the Board or included with application.
- Certified check, money order, or cashier's check for \$100.00 payable to:
LPC Board of Examiners and included with application. **Personal checks are not accepted.**

- Signature on application