

Maryland Board of Professional Counselors & Therapists

4201 Patterson Avenue Baltimore, MD 21215 – 2299

Phone Number: 410-764-4732 health.maryland.govbopc/



APPLICATION FOR INACTIVE LICENSURE/CERTIFICATION STATUS

NEW APPLICATION CONTINUED INACTIVE STATUS

License Level: LCPC LCMFT LCPAT LCADC CAC-AD CSC-AD LBA

License/Certification Number: _____ Expiration Date: _____

Fees: \$50.00 Annually (Check or Money Order)

PERSONAL INFORMATION

Last Name and Generational Indicator (Jr., III etc.)

Grid for last name and generational indicator.

First Name And Middle Name / Initial

Grid for first name and middle name/initial.

Maiden Name

Grid for maiden name.

Address Line One

Grid for address line one.

Address Line Two (Apt #)

Grid for address line two.

City

State

Zip Code

Grid for city, state, and zip code.

Email Address _____

Date of Birth:

Grid for date of birth (Month - Day - Year).

Social Security Number:

Grid for social security number.

Race:

- 1. White
- 2. African American
- 3. American Indian
- 4. Asian
- 5. Hispanic
- 6. Other

Sex:

- 1. Male
- 2. Female

Home Phone _____

Work Phone _____

Cell Phone _____

Please submit the following:

- 1) The application form for inactive status
- 2) A check or money order for \$ 50.00 payable to the Board of Professional Counselors and Therapists.

Date: _____ Signature: _____

A license or certificate may remain on inactive status for five (5) years starting from the date of the active license / certificate expired.

In order to reactivate a License or Certificate the applicant must submit:

- 1) The reactivation application;
- 2) Pay the appropriate fees;
- 3) A copy of the required documentation of 40 or 80 continuing education credit hours stipulated in COMAR 10.58.05 Continuing Education Requirements.

The continuing education credit hours must be **earned in the 2 years preceding** the submission of the reactivation application.

FOR BOARD USE ONLY

Fee Received: _____

Check / Mo # _____

Added to License DB _____