

1. Name: \_

# Colorado Education Equivlalency Application

#### **INSTRUCTIONS AND REQUIRED ITEMS**

- 1. Type or clearly print all information. Complete all sections.
- 2. Sealed, official graduate transcripts are required.
- 3. Include course descriptions copied from the academic catalog for the year in which the courses were completed.
- 4. Include completed Practicum/Internship Verification Form.
- 5. Complete the Payment Voucher with your credit card information or attach a personal check, certified check or money order for \$150 payable to CCE.

Please list any other names used on transcripts, licenses, etc.:

FOR OFFICE USE ONLY
REF.#:
AMOUNT:
BATCH #:
DATE:

2. Mailing Address: _						
3. Home Telephone: _			Business Telephone:			
4. E-mail Address:						
5. Gender: Male	e Female	6. Social Secu	urity Number:			
7. Education (please d	locument additional related	d degrees on a separ	rate sheet and include with appli	ication materials):		
Graduate Degree (e.g. M.A., M.S., Ph.D.)	Name of College/University	Date Degree Conferred Major Study (e.g., counseling, clinical mental health, addictions counseling)  Number of Credit Hours Received (Indicate semester or quarter hours)				
			training program (CTP). If you vance in Colorado Rule 14 enabl			
					YES	NO
The CTP was regiona	ally accredited. Identify ac	ccrediting agency:				
The CTP was a separ	ate department or program	1.				
		ith a department he	ad/program head qualified to be	a licensed		
professional counseld						
The CTP had an iden						
	aminations and grading pr					
			Coursework Verification Form.			
			nours in the principles and the pr			
must appear on your		letter from the depart	orm must be completed and the partment chair or the professor secorm.)			
quarter hours) in a co		if enrolled prior to	eling master's program or 96 ser August 31, 2014, or 60 semeste			
	erstand Colorado Rule 14 uncil for Accreditation of C		nination (CRS 12-43-603)]. My e red Educational Programs (CAC			ncy
Applicant's Signature:				Date:		
Colorado Educa	tion Equivalency Review revis	sed 0 - 201 - [				3



## Coursework Verification Form

Applicant's Name:	 Date:
rr ······	

#### **INSTRUCTIONS**

- 1. Please print legibly or type.
- 2. Include an official sealed transcript(s) for all relevant graduate coursework (do not include undergraduate) or have transcript(s) sent directly from the registrar's office to CCE. If sent separately from your application, transcripts should be addressed to: CCE · 3 Terrace Way · Greensboro, NC 27403-3660.
- 3. Course descriptions for any courses you wish to have reviewed toward the requirements must be included with this form. Course descriptions must be photocopied from the catalog for the year in which the courses were taken.
- 4. This form must be completed in order for CCE to review your coursework. If CCE determines that the specified course does not fit the indicated category, your transcript will be reviewed for other course possibilities.

#### REQUIRED COURSEWORK

Only graduate-level courses are accepted. A course may not be used for more than one content area. A minimum of two semester hours or three quarter hours of coursework is required for each content area. Courses may be combined to fulfill a content area. Per Colorado Rule 14 [Licensure by Examination (CRS 12-43-603)], if you have not completed a course to satisfy each content area, you may request consideration of other suitable means of meeting this requirement. You should submit a letter from the department chair attesting that the requirement for education in the content area has been satisfied by alternative means and detailing the alternative means.

	Content Area	Date Taken	Course Number	Credit Hours	Institution Where Course Was Taken
1.	Human Growth and Development Includes studies that provide a broad understanding of the nature and needs of individuals at any developmental level, normal and abnormal human behavior, personality theory, and learning theory within cultural contexts.				
2.	Social and Cultural Foundations Includes studies that provide a broad understanding of societal changes and trends, human roles, societal subgroups, social mores and interaction patterns, and differing lifestyles.				
3.	Helping Relationships Includes studies that provide a broad understanding of philosophic bases of helping processes, counseling theories and their applications, basic and advanced helping skills, consultation theories and their applications, client and helper self-understanding and self-development, and facilitation of client or consultee change.				
4.	Groups Includes studies that provide a broad understanding of group development, dynamics and counseling theories; group leadership styles; basic and advanced group counseling methods and skills; and other group approaches.				

Applicant's Name:	Da	ate:
rippiicuit britaile.		

	Content Area	Date Taken	Course Number	Credit Hours	Institution Where Course Was Taken
5.	Lifestyles and Career Development Includes studies that provide a broad understanding of career development theories; occupational and educational information sources and systems; career and leisure counseling, guidance and education; lifestyle and career decision-making; career development program planning and resources; and effectiveness evaluation.				
6.	Appraisal Includes studies that provide a broad understanding of group and individual educational and psychometric theories and approaches to appraisal, data and information-gathering methods, validity and reliability, psychometric statistics, factors influencing appraisals, and use of appraisal results in helping processes.				
7.	Research and Evaluation Includes studies that provide a broad understanding of types of research, basic statistics, research report development, research implementation, program evaluation, needs assessment, and ethical and legal considerations.				
8.	Professional Orientation Includes studies that provide a broad understanding of professional roles and functions, professional goals and objectives, professional organizations and associations, professional history and trends, ethical and legal standards, professional preparation standards, and professional credentialing.				
9.	Practicum/internship in the principles and practice of professional counseling				

**Note**: For master's or doctoral degrees awarded prior to September 1, 1992, ONLY, no minimum number of semester (or quarter) hours is required and only seven of the first eight areas listed above are required. A 700-hour practicum/internship is still required, and all other educational requirements still apply.



# Colorado Education Equivlalency Practicum/Internship Verification

NOTE: If you enrolled in your degree program prior to August 31, 2014, and did <u>not</u> complete 700 hours in your practicum/ internship, you may submit evidence of post degree experience that may be accepted at the discretion of the board.

Name (last, fir	rst, middle initial)	):		
			, location and supervi f quality practicum/in	sion information for each qualifying practicum/ nternship is required.
INSTITUTION/P	LACE OF EMPLOYM	1ENT		
ADDRESS				
DIRECTOR OF	PROGRAM			
MAJOR SUPER	VISOR			
	FROM		TO	TOTAL HOURS
MONTH	YEAR	MONTH	YEAR	
	I		l	
INSTITUTION/P	LACE OF EMPLOYN	IENT		
ADDRESS				
DIRECTOR OF	PROGRAM			
MAJOR SUPER	VISOR			
	FROM		ТО	TOTAL HOURS
MONTH	YEAR	MONTH	YEAR	
INSTITUTION/P	LACE OF EMPLOYN	IENT		
ADDRESS				
DIRECTOR OF	PROGRAM			
MAJOR SUPER	VISOR			
	FROM		ТО	TOTAL HOURS
MONTH	YEAR	MONTH	YEAR	TOTAL HOURO
L	l		I	

Total number of hours of counseling experience provided by practica/internships:



# Colorado Education Equivlalency Payment Voucher

### **PLEASE NOTE**

- All fees must be paid in U.S. dollars.
- All fees are nonrefundable and nontransferable.
- Review results will be sent six weeks after application receipt.
- You will be notified in writing of your status and informed if further information is needed.
- Please make check or money order payable to CCE.

### **METHOD OF PAYMENT**

Appli	cant's Name	9:
Геleр	ohone:	DAY: EVENING:
	Enclosed is	s a check or money order payable to CCE in the amount of \$150.
	Please cha	arge the credit card listed below in the amount of \$150.
	Card Type:	☐ VISA ☐ MasterCard ☐ American Express
	Name on C	Card:
	Account Number:	
		Card Security Code (from back of card):
	Expiration Date:	
	Cardholde	er Signature: Date (mm/dd/yyyy):

### **SUBMIT YOUR APPLICATION AND PAYMENT**

- Mail: CCE; P.O. Box 63223; Charlotte, NC 28263-3223
- Fax: 336-482-2852