

**CONTINUING EDUCATION FILE**

**FOR LICENSE RENEWAL**

Name: \_\_\_\_\_ License Number: \_\_\_\_\_  
 Date Licensed: \_\_\_\_\_  
 Address: \_\_\_\_\_ Renewed: \_\_\_\_\_  
 \_\_\_\_\_ Expiration Date: \_\_\_\_\_

For license renewal, you must document the minimum of 24 clock hours of continuing education for each renewal period OR retake and pass the National Counselor Examination (NCE) or the National Clinical Mental Health Counseling Examination (NCMHCE) within twelve months prior to the expiration date. Three (3) of the 24 clock hours must be in ethics.

Each activity must be recorded on this folder.

**DOCUMENTATION SHOULD NOT BE SENT TO ARBOEC UNLESS REQUESTED FOR MANDATORY AUDIT.**

**ACTIVITIES TO BE LISTED**

**DOCUMENTATION NEEDED**

- College/University Courses..... Copy of Transcript/Grade Report
- Seminars, Workshops, Conferences..... Copy of Certificate or Letter of Attendance
- Publication Activities..... Copy of Cover Page of Article or Book
- Supervision/Consultation as LPC/LMFT..... Letter from Supervisor
- Dissertations..... Copy of Transcript and abstract
- Leadership..... Letter of Confirmation


**CONTINUING EDUCATION CONVERSION CHART**

- One (1) Continuing Education Unit (CEU)..... 10 contact hours
- One (1) Semester Credit..... 15 contact hours
- One (1) Quarter Credit..... 10 contact hours

**CONTINUING EDUCATION FOLDER**

A continuing education folder is sent to each new licensee. A new folder is sent with license renewal receipt. Each folder is to be maintained for the two-year period. The licensee has the responsibility to keep an accurate records of continuing education activities. The folder should be used for recording activities and maintaining a file of the required documentation. If audited, continuing education documentation should be sent to the Board office with renewal fee. The Board cannot process individual pieces of documentation. Separate pieces of documentation received by the Board will be returned to

**ARBOEC Arkansas**  
**Board of Examiners in Counseling**  
 101 East Capitol, Suite 202  
 Little Rock, AR 72201  
 Telephone: (501) 683-5800 Fax: (501) 683-6349  
 Email: [john.carmack@arkansas.gov](mailto:john.carmack@arkansas.gov)



**Created by Act 593 of 1979**  
**Amended by Act 244 of 1997**

Record this information on an ongoing basis as you accrue continuing education credit

**DATES:** You may request credit for continuing education activities that occur between your license renewal date and your expiration date. Indicate the date(s) on which each activity took place. Continuing education hours in excess of the 24 required for renewal may be submitted for credit in the new license period if they were taken after the April 1 billing date for renewal or 90 days prior to expiration date.

**COURSE/ACTIVITY:** Name the course or activity in which you participated. Courses and activities include college and university courses, seminars, workshops, conferences and in-service activities. The continuing education activities must be geared toward professionals in the mental health field and must focus on increasing knowledge and/or skill in the practice of counseling or therapy.

**CONTENT AREA:** Designate the content area of each continuing education activity by using the numbers that follow. Continuing education activities taken for license renewal credit must focus on increasing knowledge and/or skills in the practice of counseling /therapy in one or more of the areas listed to the right:

**PROVIDER NAME:** List the name of the college or university offering the course or the name of the organization offering the activity.

**NBCC PROVIDER # IF APPLICABLE:** List the four digit provider number for any activity taken from an NBCC provider. The number may be found on the NBCC Approved Provider List.

**TYPE OF DOCUMENTATION IN FOLDER:** List the type of documentation included in your folder verifying attendance at the course or activity. Approved providers must issue proper documentation for each activity that they offer. If you choose to take activities from non-approved providers, be certain to obtain the proper documentation from them. When certificates are not awarded, a letter containing the required information should be obtained from the sponsor. Copies of brochures, announcements and agendas are not considered acceptable proof of attendance. The Board cannot accept documentation when it is submitted directly to the Board by a sponsor.

**NUMBER OF CONTACT HOURS:** List the number of contact hours for each course or activity. Contact hours are defined as the number of actual clock hours spent in direct participation in a structured educational format as a learner.

**SPECIALTY CODES:** Career - C, Gerontological - G, Clinical Mental Health - MH, Addiction - A, etc. See chart below:

1. **COUNSELING THEORY** basic theories, principles and techniques of counseling and their application to professional counseling settings.
2. **HUMAN GROWTH AND DEVELOPMENT** includes studies that provide a broad understanding of the nature and needs of individuals' at all developmental levels, normal and abnormal human behavior, personality theory, life span theory, and learning theory within cultural contexts.
3. **SOCIAL AND CULTURAL FOUNDATION** societal changes and trends; human roles; societal subgroups; social mores and interaction patterns; multicultural and pluralistic trends; differing lifestyles; and major societal concerns including stress, person abuse, substance abuse, discrimination and methods for alleviating these concerns.
4. **THE HELPING RELATIONSHIP** philosophic bases of helping processes; counseling theories and their application; basic and advanced helping skills; consultation theories and their application; client and helper self-understanding and self-development; and facilitation of client or consultee change.
5. **GROUP DYNAMICS, PROCESSING AND COUNSELING** group development, dynamics and counseling theories; group leadership styles; basic and advanced group counseling methods and skills; and other group approaches.
6. **LIFESTYLE AND CAREER DEVELOPMENT** 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, resources, and effectiveness evaluation.
7. **APPRAISAL OF INDIVIDUALS** group and individual educational and psychometric theories and approaches to appraisal; data and information gathering methods; validity and reliability; psychometric statistics; factors influencing appraisal; and use of appraisal results in helping processes. Additionally, the specific ability to administer and interpret tests and inventories to assess abilities, interests, and identify career options is important.
8. **RESEARCH AND EVALUATION** research; basic statistics; research - report development; research implementation; program evaluation; needs assessment; publication of research information; and ethical and legal consideration.
9. **PROFESSIONAL ORIENTATION** professional roles and functions; professional goals and objectives; professional organizations and associations; professional history and trends; ethical and legal standards; and professional credentialing.
10. **MULTIPLE SESSIONS/CONFERENCES** include total contact hours earned through multiple sessions which meet several approved content areas. Examples (under this content area) would include ACA National Conferences, AAMFT conferences, and a series of in service sessions covering many topics.

Specialty Renewal Requirements (When applicable, specialty exam may be substituted for specialty hours)		
Code	Specialty	Percentage of Clock Hours in Specialty
C	Career	25
Sch	School	25
G	Gerontological	25
MH	Clinical Mental Health Counselor/Psychotherapist	25
A	Addictions	25
H	Hypnotherapy	25
R	Rehabilitation	25
AP	Appraisal	25
D	Drug & Alcohol	25
P	Pastoral	25
S	Supervision	25
PT	Play Therapy	25
B	Biofeedback	25

**LISTING OF A MINIMUM OF 24 HOURS OF CONTINUING EDUCATION INCLUDING 3 HOURS OF ETHICS**

Dates	Course/Activity	Content Area	Provider Name	NBCC Provider # (if applicable)	Type of documentation in folder	Number of contact hours	Specialty Code
Total CEU's - this page						0	

Dates	Course/Activity	Content Area	Provider Name	NBCC Provider #	Type of documentation in folder	Number of contact hours	Specialty Code

**Supervision/Consultation, Dissertation, Publication and Leadership Actives may not exceed the indicated maximum of hours in a two year renewal period.**

Date	Title of Publication/Presentations	Publisher/Journal/Site of Presentation	Max for Publication/ Presentation 20 Hours
Date	Title of Dissertation	Name of College or University	Max for Dissertation 22 Hours
Date	Supervision/Consultation	Name of Supervisor	Max for Supervision 20 Hours
Date	Leadership	Position Held	Max for Leadership 22 Hours

Hours Submitted