

ELIGIBILITY FOR LIMITED PROFESSIONAL COUNSELOR LICENSE (LLPC)

1. Submit an [application for a limited professional counselor license](#) along with the appropriate application fee. Check the box that says “Limited L.P.C.”
2. Official transcripts confirming having received a master’s or doctoral degree in counseling or student personnel work must be **submitted directly to this office from a regionally accredited educational institution**. An applicant must have completed not less than 48 semester hours or 72 quarter hours in counseling topics which includes studies in all of the following: career development; consulting; counseling techniques; counseling theories; counseling philosophy; group techniques; professional ethics; research methodology; multicultural counseling; testing procedures; practicum; an internship that consists of not less than 600 hours of supervised clinical experience in the practice of counseling.
3. A completed [Certification of Counseling Education](#) form must be submitted to this office directly from your educational institution confirming the completion of an approved counselor training program. After you have completed page 1, give the entire form to the Counseling Program Coordinator, who will complete the form and submit it to LARA.
4. A Professional Disclosure Statement must be submitted with your application. Professional Disclosure Statement Section 18113 of the Michigan Public Health Code, 1978 PA 368, as amended, requires that a licensed counselor furnish a Professional Disclosure Statement to all prospective clients before engaging in counseling services. A Professional Disclosure Statement is required from every applicant, *even if you are not currently practicing*. You must provide a separate Professional Disclosure Statement for each practice location. You are required to submit a new Professional Disclosure Statement to the board within 30 days if you have any changes to the required information. Your license cannot be issued without a Professional Disclosure Statement(s) on file. Attach a copy of your Professional Disclosure Statement(s) to your application for licensure.

YOUR PROFESSIONAL DISCLOSURE STATEMENT MUST INCLUDE ALL OF THE FOLLOWING INFORMATION:

- Your name, business address, and telephone number. (If not currently employed provide your name, address and telephone number as shown on your application for licensure.)
- A description of your practice.
- A description of your education and experience.
- The fee you charge your clients or a statement if you do not charge a fee

- The following information must be included in your Professional Disclosure Statement in the event your client(s) would like to file a complaint regarding your counseling services. This address and phone number should not be used for any other purpose. Michigan Department of Licensing and Regulatory Affairs Bureau of Professional Licensing Investigations & Inspections Division P.O. Box 30670 Lansing, MI 48909 (517) 373-9196
 - *If you are applying for the limited counselor license, you must include the name of the licensed professional counselor who will be supervising your 3000 hours of post-degree experience.* In addition, the Professional Disclosure Statement must include the following statement, “I agree to supervise (insert your name) for the required postdegree counseling experience.” This statement must be signed by the supervising licensed professional counselor and must include his/her license number.
5. A fingerprint report and criminal background check are required. Upon review of your application, you will be mailed an Application Confirmation letter containing instructions to complete the Criminal Background Check.