

**Licensed Chemical Dependency Counselor Application –  
Licensure by Reciprocity**

Mail your completed application packet with \$65 to:  
Texas Department of State Health Services  
Professional Licensing and Certification Unit – MC 2003  
P O Box 149347  
Austin, TX 78714-9347  
(512) 834-6605 FAX (512) 834-6677  
lcdc@dshs.state.tx.us

For Official Use Only  
Budget #ZZ743  
Fund #191

**PHOTO**

**IN THIS SPACE SECURELY  
ATTACH PHOTO TAKEN  
WITHIN THE PAST YEAR**

Please write your name and date of  
birth on back of this photo

**Section I – Personal Information**

Social Security Number	Last Name	First Name	Middle Initial

Mailing Address

City	State	ZIP Code	County

(    )	
Home Phone	Gender Female <input type="checkbox"/> Male <input type="checkbox"/>

(    )	
Work Phone	Date of Birth

Are You Bilingual?     Yes     No      If Yes please specify: \_\_\_\_\_

**Section II – Education & Credential Information**

High School Graduate       GED       College

Name of College/University \_\_\_\_\_

Degree \_\_\_\_\_ (Associates, Bachelors, etc.)

Major \_\_\_\_\_ Minor \_\_\_\_\_

Name of Reciprocal Credential \_\_\_\_\_ Exp Date \_\_\_\_\_

Name of Issuing Authority \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

Ethnic Origin:       African American       Asian       Caucasian  
                          Hispanic                       Native American       Other

### Section III - Criminal History

In accordance with 25 Texas Administrative Code, Chapter 140, Subchapter I, every applicant is required to submit fingerprints for the purpose of obtaining a criminal history check from both the Department of Public Safety (DPS) and the Federal Bureau of Investigations (FBI). Enclosed with this application are instructions for you to submit your fingerprints. Please follow the instructions on the pass carefully. **Your fingerprints will be submitted electronically. Please include a copy of your receipt or written confirmation of your fingerprint submission with this application.**

If you live outside the state of Texas and are not going to be in Texas in the near future, please contact our office regarding an alternate fingerprint process for obtaining your criminal history.

### Section IV - Statement of Understanding Please initial each item and sign where indicated.

\_\_\_\_\_ I hereby authorize any organization(s), entities or person(s) named in this application to release to the Texas Department of State Health Services (DSHS) any information they may have regarding me.

\_\_\_\_\_ I understand that all information provided on this application is true and correct to the best of my knowledge, and that intentionally false or misleading statements on this application may result in my being declared ineligible for licensure.

\_\_\_\_\_ I understand that data from my application may be used for statistical purposes.

\_\_\_\_\_ I understand that the licensure documentation will become the property of DSHS.

\_\_\_\_\_ I understand that all application and licensure fees are non-refundable.

\_\_\_\_\_ I agree to abide by the ethical standards contained in the LCDC licensure rules.

By signing this application I have read Title 25, Texas Administrative Code, Chapter 140, Subchapter I, and I accept responsibility for remaining knowledgeable of licensure rules, including revisions.

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Date**

**Subscribed and sworn to before me this** \_\_\_\_\_ **day of** \_\_\_\_\_ **20**\_\_\_\_\_

**Notary Public in and for** \_\_\_\_\_ **County, state of** \_\_\_\_\_

**My certificate expires** \_\_\_\_\_

\_\_\_\_\_  
**Notary Public**

## Instructions for submitting fingerprints for criminal history check

Please follow the following instructions, provided by the Texas Department of Public Safety, for submitting your fingerprints to complete the background check for this application.

1. Schedule an appointment to be electronically fingerprinted by MorphoTrust USA at one of their IdentoGo enrollment centers. You can schedule an appointment via the Internet or over the phone.
  - Internet based scheduling is the quickest and most convenient way to obtain a fingerprint appointment.
    - a. You may begin the process now by simply clicking on this link:  
<https://uenroll.identogo.com/servicecode/11BG44>
    - b. Provide all required pre-enrollment data and select a convenient date and time for your appointment. Your agency-assigned applicant number is AD-, followed by your first initial, your last initial and your date of birth in MMDDYYYY format.
  - If you prefer to schedule over the telephone, you must:
    - a. Have your Service Code ready (**11BG44**), then call **888.467.2080**;
    - b. MorphoTrust will prompt you for the Service Code (**11BG44**);
    - c. Provide all required pre-enrollment data and select a convenient date and time for your appointment. Your agency-assigned applicant number is AD-, followed by your first initial, your last initial and your date of birth in MMDDYYYY format.
2. Arrive at your scheduled appointment with your photo identification and fee
  - If you plan on bringing a form of identification other than a valid (unexpired) TX Driver License, please refer to the Department of Public Safety's acceptable document types here: <http://www.l1enrollment.com/state/forms/tx/55fc619a7f7aa.doc>
  - MorphoTrust accepts Visa/MasterCard/Discover/American Express, business checks, money orders and coupon codes (employer accounts) at the time of service.
  - Please note that personal checks and cash are **not accepted**.
3. Your fingerprints will be submitted electronically to DPS and the FBI. **You will not receive a printed fingerprint card.**
4. At the conclusion of your appointment, the MorphoTrust enrollment agent will provide you with an IdentoGo receipt stating that you were fingerprinted.
  - Do not throw away the receipt; provide a copy of the receipt with your application.
  - You may check status on your submission by clicking on this link:  
<https://uenroll.identogo.com/servicecode/11BG44> and then;
  - Click "**Check Status**"

Fingerprints provided for this application shall be used to check criminal history records of the Texas Department of Public Safety and the Federal Bureau of Investigation, in accordance with applicable statutes. Failure to follow these directions may result in the delay of processing your background check and/or your application.

## Licensed Chemical Dependency Counselor Reciprocity Application Check List

A completed application for reciprocity is one that consists of the following:

- Application and Background Investigation fee of \$65.00 (cashier's check or money order); Payable to DSHS. **Applications will not be processed without the total fee of \$65.00**
- Completed application signed, dated and notarized;
- A recent full-face wallet sized photo attached to application;
- Two letters of recommendation on letterhead, dated and signed from Qualified Credentialed Counselors (QCC);
- Confirmation of submission of fingerprints (see page 3 of application);
- A current copy of your reciprocal state certification or license;
- An official college transcript showing approved college degree.

**Refer to the program rules for a complete description of reciprocity requirements.**

## Instructions for Completing the Licensed Chemical Dependency Counselor Reciprocity Application

### Section I

Please print all requested information.

### Section II

Official transcripts must be original and contain an official seal and registrar's signature.

Attach a copy of your current certification or license and provide the information about the state certification or license that you hold. If possible, also include a written verification of your license from the issuing authority.

### Section III

Criminal History – Follow the instructions on page 3 for the submission of fingerprints.

### Section IV

Read the Statement of Understanding before signing and notarizing application.

The review process for a reciprocity application consists of the following:

1. Written verification that your out of state certification/licensure is current and in good standing;
2. Texas Department of Public Safety background check;
3. FBI background check.