

MONTANA BOARD OF BEHAVIORAL HEALTH
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INSTRUCTIONS FOR SOCIAL WORK LICENSURE BY EXAMINATION & ENDORSEMENT

FEES

- The application fee for licensure by exam and licensure by endorsement is \$200.00. The fee includes the cost of the Social Worker License Candidate (SWLC) and the Licensed Clinical Social Worker (LCSW) credentials.
- Please consider making licensure application on-line at <https://ebiz.mt.gov/pol/> . The on-line application fee is paid by debit or credit card.
- Payment must be included with applications submitted by mail. Fees are payable to the Montana Board of Behavioral Health by check, money order, or cashier's check.
- All application fees are NON-REFUNDABLE and must be received with your application to insure proper processing.
- Submission of fees and application does not ensure issuance of a license.

SOCIAL WORKER LICENSURE CANDIDATE PROCEDURE. ARM [24.219.505](#)

- All licensure applicants shall first qualify and receive a Social Worker Licensure Candidate credential (SWLC).
- A completed Social Worker Licensure Candidate application must include the application fee.
- An official transcripts must be provided directly from the institution documenting the applicant's completion of a doctorate or master's degree in social work from a program accredited by the Council on Social Work Education (CSWE) or a program approved by the Board. [37-22-301(2)(a), MCA].
- Applicants must submit a signed Supervision Agreement between the applicant and supervisor(s). The agreement will address the duties of the candidate and supervisor, the obligations of the candidate and supervisor under ARM 24.219.504, confidentiality, frequency and method of supervision, and duration and the termination of the supervision agreement. The agreement shall also include a statement of compliance with applicable patient privacy laws and the supervisor's qualifications. The Board approved form is available on the website at http://b.bsd.dli.mt.gov/license/bsd_boards/bbh_board/board_page.asp and is called the **Supervisory Agreement for all Professions.** Applicants must submit a Supervision Agreement for each supervisor used in accruing the 3000 work experience hours.
- Applicants must submit a Proposed Training and Supervision Plan that is subject to Board approval. The Board approved form is available on the website at http://b.bsd.dli.mt.gov/license/bsd_boards/bbh_board/board_page.asp and is called the **Supervisory and Training Plan for all Professions.** The Plan must include identification of the candidate and the qualified supervisor; the supervisors' license types, license numbers, and amount of post-licensure experience or training in clinical supervision; verification that any and all licenses held by the supervisor in all jurisdictions are unrestricted with no pending discipline.
- The Supervisory and Training Plan must also include a proposed record of supervision in a form approved by the Board that will address and document the licensure candidate's experience for the purpose of meeting the requirements of [37-22-301(2)(b) MCA] and satisfy the requirements of ARM 24.219.504(1). The Board approved form is available on the website at http://b.bsd.dli.mt.gov/license/bsd_boards/bbh_board/board_page.asp and is called the **Clinical Supervision Log** (Excel spreadsheet).

- Applicants shall submit three reference letters. The letters will be received from a Licensed Clinical Social Worker, Psychiatrist, or a Psychologist. [[37-22-301\(2\)](#) MCA].
- All applicants are required to complete a fingerprint and background check by the Department of Justice and the Federal Bureau of Investigations [37-22-301(5) MCA] and [37.1.307(2)-(5) MCA]. Results must be received by the Board office prior to issuance of the candidate credential. All fingerprint materials are listed on the website at http://b.bsd.dli.mt.gov/license/bsd_boards/bbh_board/board_page.asp under **Finger Print and Background Check Information for Social Workers.**

□ **SOCIAL WORKER EDUCATION REQUIREMENTS:**

- Applicants shall have completed a doctorate or master's degree in social work from a program accredited by the Council on Social Work Education (CSWE). [[37-22-301\(2\)\(a\)](#) MCA].
- It is the applicant's responsibility to ensure that official transcripts, showing the degree awarded and date conferred, are sent directly from the educational institution to the Montana Board of Behavioral Health.

□ **SOCIAL WORKER EXPERIENCE REQUIREMENTS: ARM [24.219.504](#)**

- Candidates may begin accruing work experience hours on a form approved by the Board upon receipt of the SWLC credential. The Board approved form is available on the website at http://b.bsd.dli.mt.gov/license/bsd_boards/bbh_board/board_page.asp and is called the **Clinical Supervision Log** (Excel spreadsheet)
- A SWLC must be supervised by a qualified supervisor according to [24.219.421](#) ARM.
- The 3000 supervised hours shall be spent providing psychotherapy or clinical social work services to individuals, families, and groups, of which at least 50 percent shall include the application of psychosocial methods in direct client contact.
- Supervision may be received under a qualified LCSW, LCPC, Psychologist, or Psychiatrist. At least 100 hours of individual or group supervision must be documented by a qualified supervisor. However, at least 50 percent of the 100 hours shall be individual and face-to-face by a *Licensed Clinical Social Worker, and at least ten hours of which includes direct observation of the service delivery.* Each supervisory session shall be documented with a record of supervision.
- The licensure candidate must maintain the record of supervision. The record must include date and length of supervision in increments not less than 15 minutes; names of the licensure candidate, supervisor (including type of license and number) and signatures of both.
- The supervision log must include content summary (excluding confidential information) and evidence of the candidate's minimal competencies in the areas of an identified theory base, application of a differential diagnosis, establishing and monitoring a treatment plan, development and appropriate use of the professional relationship, assessing the client for risk of imminent danger, and implementing a professional and ethical relationship with clients and colleagues. ***Supervision entries MUST include content demonstrating the licensure candidate's developing competence in the above named areas.***
- The supervision logs must include an attestation of the record of supervision by the supervisor. Falsification or misrepresentation of the record of supervision shall be considered unprofessional conduct and may result in discipline of the candidate and or supervisor's licenses.
- Supervision logs will verify that supervision has been conducted on a regular basis. No more than 160 hours of social work experience shall transpire without providing at least two hours of supervision. Less frequent supervision may take place under unusual circumstances only with prior approval by the Board.
- Logs shall reflect the supervisor's experience and expertise with the licensure candidate's client population (i.e. child, adolescent, adult, chemically dependent) and methods of practice (i.e. individual, group, family, crisis or brief interventions).

- All reports and/or assessment interpretations and results sent to other public or private agencies that affect the current social status of a client must be reviewed by and contain the approval and signature of the supervisor. These reports shall identify the supervisee's "in-training" non-licensed status or identify that the supervisee is a social worker licensure candidate.
- All therapeutic interventions and the assessment results and interpretations used in the planning and/or implementation of those therapeutic interventions shall be reviewed and preapproved by the supervisor on a continual and ongoing basis.
- All professional communications, both private and public, including advertisements, shall clearly indicate the supervisee's "in-training" and non-licensed status or indicate that the supervisee is a social worker licensure candidate. All therapeutic interventions and the assessment results and interpretations used in the planning and/or implementation of therapeutic interventions shall be reviewed and preapproved by the supervisor on a continual and ongoing basis.

LICENSURE OF OUT OF STATE SOCIAL WORK APPLICANTS-Licensure by Endorsement

ARM [24.219.512](#)

- An applicant for licensure by endorsement in Montana may be granted a temporary permit to practice clinical social work, provided the applicant has submitted a completed application and that the initial screening by board staff shows that the current license is in good standing and not on probation or subject to ongoing disciplinary action. The temporary permit will remain valid until a license is granted or until notice of proposal to deny license is served, whichever occurs first. In the event that neither contingency have occurred within one year of issuance of the temporary permit to the endorsement applicant, the temporary permit shall expire and may not be renewed.
- Applicants for licensure by endorsement must hold a valid and unrestricted license to practice as a social worker in another state that was issued under standards equivalent to or greater than the current standards in the state of Montana.
- Official written verification of such the licensure status must be received by the Board directly from the other state(s).
- Applicants shall complete the application and pay the application fee.
- It is the applicant's responsibility to ensure that official transcripts, showing the degree awarded and date conferred, are sent directly from the educational institution to the Montana Board of Behavioral Health. [[37-22-301\(2\)\(a\) MCA](#)].
- 3000 hours of supervised work experience must be verified by the candidate. [[37.22.301\(2\) MCA](#)]. The hours may be verified by affidavit in the absence of access to the former supervisor.
- In addition, applicants shall submit proof of continuous practice as a social worker in another state for the two years preceding the date of licensure application in Montana.
- Applicants shall supply proof of successful completion of the Association of Social Work Board's (ASWB) clinical exam or another board approved licensing examination. Candidate scores must be forwarded directly to the Board.
- Applicants shall submit three reference letters. The letters will be received from a Licensed Clinical Social Worker, Psychiatrist, or a Psychologist. [[37-22-301\(2\) MCA](#)].
- All applicants are required to complete a fingerprint and background check by the Department of Justice and the Federal Bureau of Investigations [[37-22-301\(5\) MCA](#)] and [[37.1.307 MCA](#)].

NATIONAL REGISTRY LICENSURE OPTION

- The Board may verify qualifications for licensure by reference to information supplied in an applicant's official record with the national registry of the ASWB. The applicant must request that this information be provided to the board in the manner required by the ASWB and the Board. The applicant shall be solely responsible for paying any fee associated with this service.

- **SOCIAL WORKER LICENSURE CANDIDATE ANNUAL REGISTRATION REQUIREMENTS.** ARM [24.219.507](#)
 - Individuals shall register annually as a Social Worker Licensure Candidate (SWLC) on or before December 31. An individual may register as a Social Worker Licensure Candidate for up to five years from the date the candidate's original candidate license was issued.
 - Candidates licensed after October 1 in any calendar year will not be required to register again until December 31 of the following calendar year.
 - After the fifth registration, a Social Worker Licensure Candidate must request permission for an additional registration, which the Board may grant on a case-by-case basis.
 - Continuing education credits ARE NOT required to re-register the SWLC credential.

- **EXAMINATION INFORMATION.** 24.219.501(4)-(7) ARM
 - Candidates shall completion and submit the 3000 hours of work experience to the Board office. Upon approval of the hours, the candidate shall be instructed in writing by board staff regarding the registration process for the ASWB exam.
 - All candidates must pass the Association of Social Work Boards (ASWB) Clinical Exam or other Board approved exam prior to licensure.
 - When the Board office receives the candidate's test results from ASWB, the candidate will be issued a license if a passing score is achieved. If a failing score is reported, the candidate receives a Candidate Performance Report (CPR) with instructions for the waiting period and re-registration requirements. Candidates must wait 90 days before they are eligible to retest and must request to have their name re-entered on the ASWB exam roster by Board staff.
 - Applicants shall be allowed a maximum of three attempts to successfully pass the examination. After the third attempt, if the candidate has not achieved a passing score, the candidate must request in writing to the Board to retake the examination. The Board may require the candidate to complete a preapproved remediation plan prior to additional exam administrations.

- **LICENSURE ACTIVATION OF FORMER LCSW LICENSEES.** 24.219.501(9) ARM
 - If an applicant has previously held a license to practice as a Social Worker in the state of Montana, and the previous license was terminated as a result of the applicant's failure to renew the license, the applicant shall complete ten hours of board-approved continuing education credits for each year that the applicant's license was terminated. The applicant shall submit proof of completion of these hours at the time of application.

FINGERPRINT/BACKGROUND CHECK PROCESS:

- Read and sign the Noncriminal Justice Applicant's Rights form, following page.
- Fingerprint cards are available from most local law enforcement agencies and the Montana Department of Justice (DOJ). BELOW IS A SAMPLE. Complete the information requested at the top of the fingerprint card as it appears below prior to having your prints taken and include the following information:
EMPLOYER AND ADDRESS: Board of Behavioral Health, PO Box 200513, Helena, MT 59620-0513
REASON FINGERPRINTED: Licensure & 37-22-301, MCA
ORI: MT920078Z
- Most local law enforcement agencies will take your fingerprints for a nominal fee. It is recommended that you have digital prints taken if possible. The risk of rejection is reduced. After paying this fee and having your fingerprints taken, send the completed fingerprint card along with a check or money order for \$27.25 made payable to the "Montana Department of Justice" and mail it to Montana Criminal Records, 2225 11th Avenue, PO Box 201403, Helena MT 59620-1403. Please check with your local post office and add accurate postage prior to mailing.
- If DOJ rejects your first fingerprint card as "unreadable," the Board office will notify you and you will need to re-submit your fingerprints. You are not required to repay the processing fee to the Montana Department of Justice under these circumstances.
- **Criminal History Record Information (CHRI) from the fingerprints is only released to the Board of Behavioral Health. Your application will not be considered complete until the CHRI is received from the DOJ.**

APPLICANT <small>* See Privacy Act Notice on Back</small>		LEAVE BLANK		TYPE OR PRINT ALL INFORMATION IN BLACK			FBI		LEAVE BLANK				
FD-258 (Rev. 9-9-13) 11110-0046		SIGNATURE OF PERSON FINGERPRINTED		LAST NAME: NAM			FIRST NAME		MIDDLE NAME				
RESIDENCE OF PERSON FINGERPRINTED		ALIASES AKA		O R I			MT920078Z		DATE OF BIRTH Month Day Year				
DATE		SIGNATURE OF OFFICIAL TAKING FINGERPRINTS		CITIZENSHIP CTZ		SEX	RACE	HGT.	WGT.	EYES	HAIR	PLACE OF BIRTH	POB
EMPLOYER AND ADDRESS Board of Behavioral Health PO Box 200513 Helena, MT 59620-0513		REASON FINGERPRINTED MtCA 37-22-301 Licensed Clinical Social Workers		YOUR NO. OCA		FBI NO. FBI		ARMED FORCES NO. MNU		SOCIAL SECURITY NO. SOC		MISCELLANEOUS NO. MNU	
										CLASS		REF.	
										LEAVE BLANK			
1. R. THUMB		2. R. INDEX		3. R. MIDDLE		4. R. RING		5. R. LITTLE					
6. L. THUMB		7. L. INDEX		8. L. MIDDLE		9. L. RING		10. L. LITTLE					
LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY				L. THUMB		R. THUMB		RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY					

NONCRIMINAL JUSTICE APPLICANT'S RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for a job or license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification by the Montana Board of Behavioral Health that your fingerprints will be used to check the criminal history records of the FBI.
- If you have a criminal history record, the officials making a determination of your suitability for the job, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or updating of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the job, license, or other benefit based on information in the criminal history record.⁹

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation, executive order, rule or procedure.

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <http://www.fbi.gov/about-us/cjis/background-checks>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI at the same address as provided above. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)

If a change, correction, or update needs to be made to a Montana criminal history record, or if you need additional information or assistance, please contact Montana Criminal Records and Identification Services at dojitsdpublicrecords@mt.gov or 406-444-3625.

Your signature below acknowledges this agency has informed you of your privacy rights for fingerprint-based background check requests used by the agency for non-criminal justice purposes.

Signed Name: _____ Date: _____

Printed name: _____



In accordance with federal law regarding notices and disclosures, MT Dept of Justice requires the entity to which you are applying to work or volunteer to use this form.

Form number: APPR&R 20120611

- VERIFICATION OF LICENSURE (Proof of licensure from other states, if applicable):**
 - The applicant is responsible for requesting official verification from their original state of social worker licensure and ALL professional licenses held, regardless of status.
 - Photocopies of licenses do not qualify as official verification and should not be included with your application.

- RENEWAL:**
 - All licenses expire on December 31 every year.
 - Renewal notices are mailed 45 days prior to the expiration date to your address of record. Change of address form is available at www.bbh.mt.gov, under the Forms tab.
 - All credentials regulated under the Board of Behavioral Health, LCSW, LCPC, LMFT and LACs licensed in MT must maintain proof of 20 continuing education credits per year.

- NON-ROUTINE APPLICATIONS:**
 - If the completed application is deemed non-routine, there may be a delay in processing.
 - The Board may request that you provide additional information, and you may be requested to be available in person or by phone for the Board during a regularly scheduled board meeting.
 - A complete application must be received by the Board 15 business days prior to a scheduled board meeting. Please refer to our website for Board meeting dates.

- IMPORTANT INFORMATION FOR ALL APPLICANTS AND CANDIDATES:**
 - It is critical to your licensure to not withhold any information regarding each question on the application.
 - The applicant will be notified of any deficiencies in their application. The preferred mode of communication is e-mail. Please maintain a current e-mail address with this office as part of your record.
 - The licensure status can be viewed at <https://ebiz.mt.gov/pol/>
 - It is the responsibility of the applicant to keep the Board office informed of any name changes, address and e-mail changes, changes in licensure status, complaints or proposed disciplinary action against you in this or any other state. The change of address form is available at www.bbh.mt.gov, under the Forms tab.
 - The practice of social work, professional counseling, marriage and family therapy and addiction counseling in Montana is governed by the Board's Statutes and Administrative Rules. These are found at www.bbh.mt.gov, under the Regulations tab.

ILLEGIBLE AND INCOMPLETE APPLICATIONS WILL BE RETURNED. Application Fees must be paid before your application can be reviewed. *When the Board has all necessary documentation, your application will be processed.* Incomplete applications expire 12 months from the date received by the Board of Behavioral Health.

SOCIAL WORKERS, PROFESSIONAL COUNSELORS, MARRIAGE AND FAMILY THERAPISTS AND ADDICTION COUNSELORS ARE NOT PERMITTED TO PRACTICE IN MONTANA IN ANY MANNER WITHOUT AN ACTIVE MONTANA LICENSE.