

Checklist: Licensed Marriage & Family Therapist

Complete the forms indicated below in the appropriate column for the type of education you have completed. Submit the forms, or request that they be submitted, to the Office of the Professions at the address at the end of each form. In the space provided on the checklist below, record the date you sent or requested the form to be sent. More information on completing the forms can be found on our web site at <http://www.op.nysed.gov/prof/mhp/mftforms.htm> for licensure.

Checklist	A. Graduate of a NYS Licensure-Qualifying LMFT program after 1/1/2006 or a program accredited by COAMFTE		B. Graduate of a master's or higher degree in marriage & family therapy, determined by the Department to be the substantial equivalent of a NYS Licensure-Qualifying program based on individual transcript review**		C. Limited Permit To request authorization to practice under supervision of a qualified supervisor in an authorized setting while meeting the examination & experience requirements***		D. Endorsement of LMFT license issued in another jurisdiction Licensed as a LMFT in another jurisdiction on the basis of comparable education, supervised experience and examination, as determined by NYSED, and verification of at least 5 years of LMFT independent practice in 10 years prior to application in New York	
	Required	Date Sent	Required	Date Sent	Required	Date Sent	Required	Date Sent
To obtain a LMFT license, applicant must meet requirements for A OR B.								
To obtain a Limited Permit, which is valid for one year from date of issue, applicant must also meet requirements for C.								
To obtain a LMFT license by endorsement of a LMFT license issued in another jurisdiction,								
Form 1 Application for Licensure and fee	✓		✓		✓		✓	
Form 2 Certification of Professional Education with Section II, Part A filled out clearly and completely to identify the school and graduate program completed.	✓				Form 2 and supporting documentation for A or B must be received and approved before the Limited Permit can be issued.		✓	
Form 2 Certification of Professional Education and official transcript Have each graduate college/university you attended submit a Form 2 with official transcript.			✓					
Course syllabi, Form 2-INT and other supplementary documentation to determine whether studies meet the substantial equivalence requirements.			✓					
Form 3 Verification of Other Professional Licensure/Certification This form must be submitted directly by the licensing/certifying authority.		Only if you are/were licensed in another jurisdiction		Only if you are/were licensed in another jurisdiction			✓	
Form 4. Applicant Experience Record of supervisor(s) submitting verification of at least 1,500 hours of supervised experience in marriage and family therapy & psychotherapy in NY or another jurisdiction****	✓		✓					
Form 4B. Certification of Experience for LMFT. Form must be submitted directly by the supervisor, reporting direct client contact hours in marriage & family therapy. ****	✓		✓					

Form 4E. Endorsement Experience Record of colleagues submitting verification of LMFT practice in another jurisdiction							✓	
Form 4F. Certification of Licensed Experience by colleagues verifying 5 or more years of LMFT practice in another jurisdiction							✓	
Form 5 Application for Limited Permit and fee					✓			
AMFTRB Examination**** after receipt of application, fee & NYSED approval of education & experience or practice	✓		✓				✓	

* A program must be accredited by COAMFTE under current standards, including a supervised internship in marriage and family therapy & psychotherapy. You can access a directory of COAMFTE accredited programs at www.coamfte.org.

** An appropriately recognized program must be offered by a regionally accredited college or university in the US or be recognized by the appropriate civil authorities of the jurisdiction in which the program is offered. School must submit transcript and verification of supervised internship in marriage and family therapy & psychotherapy for review.

*** The permit may be granted for two years; it may be extended for no more than two one-year periods upon submission of a new permit application & permit fee and justification. The permit will only be issued for authorized setting(s) under qualified supervisor(s), as defined in Education Law and Commissioner's Regulations.

**** 100% of the supervised experience requirement must be direct face-to-face therapy, as defined in the Commissioner's Regulations, in the same setting under the authorized supervisor. Graduates of NYS-registered and COAMFTE accredited programs may submit supervised experience completed as part of the MFT internship; other applicants may only submit supervised experience after receipt of the qualifying degree, as determined by the Department.

***** If you passed the AMFTRB examination in another jurisdiction, you must request a score transfer from AMFTRB; scores submitted by applicants or jurisdictions are not acceptable. New York will not accept examinations given under non-standard conditions (e.g., ESL arrangements for extra time or translating dictionary); such applicants will have to take the exam under standard conditions. **No other examination is acceptable.**

Links to all forms may be found on our web site at <http://www.op.nysed.gov/prof/mhp/mftforms.htm> for licensure.

Detailed licensure information can be found on our web site at: <http://www.op.nysed.gov/prof/mhp/mftlic.htm> or contact the Mental Health Practitioners Unit by calling 518-474-3817 ext. 592 or by email at opunit5@nysed.gov.