

21 NCAC 63 .0202 APPLICATION PROCESS

(a) Pursuant to G.S. 90B-7, any person desiring to obtain a certificate or license from the Board shall make application to the Board. Applications not completed within two years of submission to the Board shall be denied. Application forms and instructions may be found on the Board's website at <https://www.ncswboard.org>.

(b) All applications for certification or licensure shall contain the following:

- (1) the applicant's contact information;
- (2) the social security number of the applicant;
- (3) the requested designation of licensure or certification type;
- (4) educational history and degree attainment;
- (5) the names and contact information of three persons supplying professional reference forms in support of the applicant's application, as well as the length of time that the persons have known the applicant;
- (6) employment history;
- (7) whether the applicant has ever been certified, licensed, or registered to practice social work by the Board, by another occupational Board, or in another state/jurisdiction and, if so:
 - (A) what credential was held;
 - (B) in what state/jurisdiction;
 - (C) the issuance date and expiration date; and
 - (D) what examinations were taken to obtain said certification, licensure, or registration;
- (8) whether the applicant has ever had a credential denied, limited, reprimanded, suspended, or revoked;
- (9) whether the applicant has ever been convicted of a felony or misdemeanor under any laws;
- (10) whether any criminal charges are pending against the applicant;
- (11) whether any court, board, agency, or professional organization has found the applicant guilty of misconduct, unprofessional conduct, dishonest or fraudulent practice, or incompetent practice;
- (12) whether any charges are pending against the applicant before any court, board, agency, or professional organization for unprofessional conduct, dishonest or fraudulent practice, or incompetent practice;
- (13) three professional references, as prescribed in 21 NCAC 63 .0204, provided in a sealed envelope with the signature of the reference over the sealed closure;
- (14) official score reports showing passage of the required examination, as prescribed herein and in 21 NCAC 63 .0301, provided from the examination testing provider;
- (15) official transcripts, as prescribed in 21 NCAC 63 .0203, provided either from the institution directly to the Board or from the applicant to the Board in an envelope that is sealed by the institution;
- (16) the applicant's affirmation that:
 - (A) the applicant has read the North Carolina General Statute 90B Social Work Certification and Licensure Act, including the Board's rules, ethical guidelines, and disciplinary procedures, which are available on the Board's website at <https://www.ncswboard.org>;
 - (B) the information provided by the applicant in the application is true;
 - (C) the applicant consents to a criminal history record check; and
 - (D) the applicant has read and understands the public notice statement on employee misclassification that is set forth in the application and has disclosed any investigations for employee misclassification, and its results, over the preceding 12-month period, as prescribed by G.S. 143-789; and
- (17) the application fee, as prescribed in 21 NCAC 63 .0208.

(c) In addition to the items set forth in Paragraph (b) of this Rule, applicants for certification as a certified social work manager shall provide a completed CSWM Administrative Supervision Form, as prescribed in Paragraph (e) of this Rule, and an Employment Verification Form, as prescribed in Paragraph (f) of this Rule, to demonstrate supervised administrative experience attained in the preceding six years.

(d) Applicants for licensure as a licensed clinical social worker who are licensed by the Board as licensed clinical social worker associates at the time of application shall provide to the Board the LCSW Short-Form Application, which contains the following:

- (1) the applicant's name, the number of the applicant's licensed clinical social worker associate license, and contact information;
- (2) the signature of the applicant and the applicant's LCSW supervisor;

- (3) whether the LCSW supervisor recommends that the applicant continue supervised clinical practice at the LCSWA level or recommends the applicant for LCSW licensure;
 - (4) the applicant's certification that:
 - (A) the applicant has completed the requirements to obtain licensure in North Carolina as a LCSW as set forth in G.S. 90B-7(d);
 - (B) the applicant has read the North Carolina General Statute 90B Social Work Certification and Licensure Act, and the Board's rules, ethical guidelines, and disciplinary procedures, which are available on the Board's website at <https://www.ncswboard.org>, and agrees to comply with them;
 - (C) the information provided by the applicant in the application is true;
 - (D) the applicant has not violated any of the Board's governing statutes or rules; and
 - (E) the applicant has not been convicted of a misdemeanor or felony crime since submitting his or her initial application for associate licensure;
 - (5) the application fee, as prescribed in 21 NCAC 63 .0208; and
 - (6) a list of all continuing education hours taken since the applicant was licensed as a LCSWA or since renewal of LCSWA licensure that provides the name of the course taken, the date on which the course was taken, the length of the course taken, and whether the course taken was distance learning or for ethics.
- (e) A CSWM Administrative Supervision Form shall contain the following:
- (1) the name of the applicant and his or her supervisor;
 - (2) the applicant's position;
 - (3) a description of the applicant's administrative duties and responsibilities for the employer;
 - (4) where the applicant worked during the time that supervision was provided to the applicant;
 - (5) dates during which the applicant was employed;
 - (6) total number of hours during which the applicant was employed;
 - (7) dates during which the supervisor provided administrative supervision;
 - (8) total number of hours during which the supervisor provided individual administrative supervision to the applicant;
 - (9) total number of hours during which the supervisor provided group administrative supervision to the applicant;
 - (10) total combined hours of individual and group hours provided to the applicant; and
 - (11) the supervisor's certification that the information set forth in the CSWM Administrative Supervision Form is correct and that the supervisor is certified with the Board on at least one level and has a minimum of two years of administrative experience in a social work or mental health setting.
- (f) An Employment Verification Form shall be completed for each place of employment where the applicant has worked over the preceding six years and shall contain the following:
- (1) the applicant's name and contact information;
 - (2) the applicant's license number, if a license is held;
 - (3) the name and contact information of the applicant's place of employment;
 - (4) the title of the applicant's position;
 - (5) whether the applicant is authorized to provide clinical services on behalf of the employer;
 - (6) the applicant's duties for the employer, as documented in a job description on the employer's letterhead;
 - (7) the name and license number of the applicant's clinical supervisor;
 - (8) whether the applicant's supervisor provided supervision to the applicant in person or remotely;
 - (9) the date of the applicant's employment;
 - (10) whether the applicant was employed full-time, part-time, or pro re nata;
 - (11) whether the applicant is paid a fee or salary for services performed; and
 - (12) the employer's signature, contact information, and the date completed.

On the Employment Verification Form, the applicant shall provide the information requested in Subparagraphs (f)(1)-(2) of this Rule and the applicant's employer shall provide the information requested in Subparagraphs (f)(3)-(12) of this Rule.

History Note: Authority G.S. 90B-6; 90B-7; 93B-8.1(c); Eff. August 1, 1987;

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