



Human Services-Board Certified

**PRACTITIONER™**

## APPLICATION PACKET

**This application form is interactive.  
Download the form to your computer to fill it out.**



CENTER FOR  
**CREDENTIALING  
& EDUCATION™**

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The Center for Credentialing & Education, Inc. (CCE) values diversity.  
There are no barriers to certification on the basis of gender, race, creed, age, sexual orientation or national origin.



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# ABOUT THE CREDENTIAL

## WHAT IS A HUMAN SERVICES-BOARD CERTIFIED PRACTITIONER?

The Human Services-Board Certified Practitioner (HS-BCP) certification is offered by the Center for Credentialing & Education, Inc. (CCE). The National Organization for Human Services (NOHS), in consultation with the Council for Standards in Human Service Education (CSHSE), worked with CCE to develop this certification. The HS-BCP is for qualifying human services practitioners, including those holding associate, bachelor's, and advanced degrees.

## COMPETENCY AREAS

1. Ethics in Helping Relationships
2. Interviewing and Intervention Skills
3. Group Work
4. Case Management
5. Human Development
6. Social and Cultural Issues
7. Social Problems
8. Assessment/Treatment Planning
9. Intervention Models/Theories
10. Human Behavior
11. Social Welfare and Public Policy
12. Research, Program Evaluation, and Supervision

## CCE ETHICS POLICIES AND PROCEDURES

HS-BCP applicants and credential holders are responsible for ensuring that their behavior adheres to the standards identified in the HS-BCP *Code of Ethics*.

Whether you are an applicant or credential holder, you are required to disclose any of the following types of matters:

- Criminal charge (Note: You do not need to disclose traffic charges unless they involve drugs or alcohol or injury to person or property.)
- Legal action related to business or occupational activities in which you are named as a defendant
- Grievance by any government entity or professional organization
- Employment termination due to conduct
- Probation or removal from any graduate program for reasons unrelated to grades

Written disclosures must be received within 60 days of you becoming aware of the required disclosure, unless you are an applicant and are disclosing a previously concluded matter. In such cases, the disclosure and required documentation must be submitted with your application

An applicant must complete all portions of the HS-BCP application, including the ethics attestation and the Applicant Agreement & Release Authorization. Disclosures and other ethics matters are reviewed in accordance with CCE procedures. Disclosures do not automatically render an individual ineligible for credentialing. CCE reserves the right to deny eligibility based on an ethics review. Application fees are not refundable when an application is rejected.

Your disclosure must be submitted in writing with your application. Please seal your written statement and supporting documentation in an envelope marked “**CCE Ethics Department.**”

Your written submission must include relevant documentation, including copies of the charges, outcomes, and paperwork indicating that required actions have been completed. Documentation regarding this varies depending on the type of matter. Please refer to [cce-global.org/Prof/Ethics](http://cce-global.org/Prof/Ethics) for samples, answers to frequently asked questions, and policies.

## EDUCATION AND EXPERIENCE

To qualify for the HS-BCP, you are required to have an associate or higher degree and 350 hours of postgraduate human services work experience. A qualifying degree must be from a regionally accredited college or university, or a state-approved community or junior college.

If your degree is in a field other than human services, counseling, social work, psychology, marriage and family therapy, or criminal justice, you must have completed a minimum of 15 semester hours (22 quarter hours) of coursework in three or more of the 11 content areas listed below, including at least two semester hours (three quarter hours) in ethics in the helping professions, two semester hours (three quarter hours) in interviewing and intervention skills, and two semester hours (three quarter hours) in case management. The 11 content areas are:

- |   |                                  |
|---|----------------------------------|
| 1. Interviewing and Intervention Skills | 7. Social Problems               |
| 2. Group Work                           | 8. Assessment/Treatment Planning |
| 3. Case Management                      | 9. Intervention Models/Theories  |
| 4. Human Development                    | 10. Human Behavior               |
| 5. Ethics in the Helping Professions    | 11. Social Welfare/Public Policy |
| 6. Social and Cultural Issues           |                                  |

## REQUIRED DOCUMENTATION

**Transcript:** An official sealed transcript listing the qualifying degree is required. If you have recently graduated, do not request a transcript until you know that the registrar has posted your degree.

**Applicants with Non-U.S. Degrees:** If you earned your degree(s) outside the United States, you will need to have the degree(s) evaluated by an international transcript evaluation service and submit the results to CCE with your application. CCE accepts evaluations completed by World Education Services, Inc.; Educational Credential Evaluators, Inc.; and the American Association of Collegiate Registrars and Admissions Officers International Education Services.

**Verification of Experience Form:** Please have this form completed by your supervisor, human resources official, or similar authority in your workplace. This form is required for all education levels. The following applicants are exempt:

- Human services educators with qualifying degrees who are currently employed in human services education programs. In lieu of the form, please submit a statement on letterhead from the school that attests to your involvement with the human services education program.
- Graduates of CSHSE-accredited programs listed at [cshse.org/accredited.html](http://cshse.org/accredited.html).
- Certain graduates of preapproved participating programs. (Exempt graduates will receive notification from CCE and their educational program.)

## EXAMINATION

All applicants are required to pass the HS-BCP Examination (HS-BCPE) to successfully complete the application process. Upon CCE's approval of your application, examination registration information will be emailed to you, and you will be eligible to register for the HS-BCPE.

Students from participating degree programs can transfer their passing HS-BCPE score to their application.

# APPLYING FOR THE HS-BCP

## THE APPLICATION PROCESS

### APPLICATION PROCESSING TIMELINE

Once your application is received, it will go through the following steps:

Processing Step	Business Days
Payment processing and account setup	3–5
Data entry and application review*	12–13
<b>Total Processing Time:</b>	15–18

\*All applications are reviewed in the order received. If your application requires review by the Ethics Department, or if additional information is needed to complete the review, this step may take longer.

If you have questions regarding the HS-BCP application and credential, contact CCE:

Telephone: 336-482-2856

Fax: 336-482-2852

Email: [credentialinfo@cce-global.org](mailto:credentialinfo@cce-global.org)

Information about all of CCE’s credentials is available at [cce-global.org](http://cce-global.org).

## SUBMITTING YOUR APPLICATION

- Please be sure to include the application fee, unless you are transferring a passing exam score. (This fee is nonrefundable and nontransferable.)
- All application materials must be submitted in English.
- All application materials should be submitted to CCE in one packet.
- If you are mailing your application, be sure to make copies of all your application materials before submitting the originals to CCE.

You have three options for submitting your application:

**Mail:** CCE  
P.O. Box 63223  
Charlotte, NC 28263-3223

**Fax:** 336-482-2852

**Email:** [credentialinfo@cce-global.org](mailto:credentialinfo@cce-global.org)

## CURRENT HS-BCP CREDENTIAL AND MAINTENANCE FEES

Fees are nonrefundable and nontransferable.

**Application fee:** \$210 (U.S. dollars)

**Annual maintenance fee:** \$40

## HS-BCP RECERTIFICATION REQUIREMENTS

The HS-BCP certification is valid for five years as long as you comply with CCE policies and procedures. As an HS-BCP certificant, you are required to adhere to ethical standards, pay annual maintenance fees, and recertify after five years to maintain the certification. CCE will mail you a recertification form approximately six weeks before the certification expiration date. In order to maintain the certification, you need to satisfy the following requirements:

1. Complete 60 continuing education hours within the HS-BCP competency areas, including a minimum of six hours specific to ethics. Each year, a random sample of 10% of all recertifying HS-BCPs is audited. If you are selected for audit, you will need to submit copies of course attendance certificates and/or other continuing education documentation.
2. Accept and sign the Ethics Attestation and Applicant Agreement & Release Authorization.
3. Pay the annual maintenance fee. Payment means you agree to continue to adhere to the HS-BCP *Code of Ethics* and report any charge or complaint about a criminal, civil, state board, or other professional disciplinary matter(s) within 60 days of your knowledge of the complaint or charge.

## HS-BCP REINSTATEMENT REQUIREMENTS

If your HS-BCP certification becomes inactive or expires, you will need to submit a **reinstatement application** along with the following in order to retain it:

- HS-BCP reinstatement fee (currently \$50)
- Payment of any past-due fees
- Documentation of 60 hours of continuing education (if expired)



**PLEASE FILL OUT ELECTRONICALLY OR PRINT CLEARLY**

1. First Name, MI: \_\_\_\_\_

Last Name: \_\_\_\_\_

Previous Name(s): \_\_\_\_\_

2. Street Address: \_\_\_\_\_

City, State/Province: \_\_\_\_\_

ZIP/Postal Code, Country: \_\_\_\_\_

3. Personal Telephone: \_\_\_\_\_

Business Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

4. Email: \_\_\_\_\_

Check here if you do NOT want your contact information shared with continuing education providers.

5. Gender:  Male  Female

6. Date of Birth (mm/dd/yyyy): \_\_\_\_\_

7. Ethnic Origin (optional—for statistical purposes only):

African American  Native American  Asian  Caucasian

Hispanic/Latino  Native Hawaiian  Multiracial  Other

FOR OFFICE USE ONLY	
REF.#1:	_____
BATCH #1:	_____
DATE:	_____
AMOUNT:	_____

8. I am interested in volunteering for  marketing efforts  examination development  standards development.

9. How did you hear about the HS-BCP certification? \_\_\_\_\_

10. Examination: A passing score on the Human Services-Board Certified Practitioner Examination (HS-BCPE) is required. If you took and passed the HS-BCPE through a participating school program within the last five years, provide the following information to transfer that passing score to this application.

Test Date: \_\_\_\_\_ School: \_\_\_\_\_



Applicant's Name: \_\_\_\_\_ Date: \_\_\_\_\_

11. Education/Degree (Enclose official sealed transcript.):

Note: If registrar will not provide you with a sealed transcript, please have your official sealed transcript sent directly to CCE; Attn: HS-BCP Reviewer; 3 Terrace Way, Greensboro, NC 27403-3660. Include a brief note on the front of your application stating that the transcript is being sent separately.

Provide information about your CSHSE degree or highest non-CSHSE degree that meets the educational requirements detailed on page 4.

Degree Earned	Date Degree Conferred	Institution Name and City/State	Name of Degree*

\* e.g., **Human Services, Social Work, etc.**

The Council for Standards in Human Service Education (CSHSE) accredits human services degree programs. If your degree program was accredited by CSHSE at the time of your graduation, you do not need to submit a Verification of Experience Form. You can verify your program's status at [cshse.org/accredited.html](http://cshse.org/accredited.html).

12. Licenses/Certifications/Registrations/Credentials/Memberships (Include copy of license/certificate.):

Issuing State or Organization	License/Certificate/Membership Type	License/Certificate/Membership Number	Issue Date	Expiration Date

13. Special Accommodations:

Check this box if you are requesting **special examination accommodations**. Include the Special Examination Accommodations Request Form and supporting documentation with your application. Requests that are not accompanied by the required documentation cannot be approved. CCE's Assessment Department will contact you directly regarding special accommodations once you are approved to sit for the HS-BCPE.





Applicant's Name: \_\_\_\_\_ Date: \_\_\_\_\_

14. Ethics Attestation:

(Please respond to each statement below)

- 1. Have you ever been or are you currently charged with a criminal offense?  YES  NO
- 2. Have you ever been or are you currently a defendant in any type of legal action related to your business or occupational activities?  YES  NO
- 3. Have you ever been or are you currently the subject of any complaint matter or disciplinary review by any government entity or professional organization?  YES  NO
- 4. Have you ever been terminated or discharged from employment for conduct reasons?  YES  NO
- 5. Have you ever been placed on probation or removed from any graduate program in which you were enrolled for reasons unrelated to grades?  YES  NO

If you answered "YES" to any of the above questions, you must include a complete, detailed explanation related to the response. You must also provide copies of relevant documentation, such as copies of the complaint, pleadings, and compliance with final orders.

Place these materials in a sealed envelope marked "Attention: Ethics Department" and return with your application. Failure to provide required information will delay the processing of your application.

All CCE applicants are required to submit written disclosures of any:

- Criminal offense. (Note: You do not need to disclose traffic charges unless they involve drugs, alcohol, or injury to person or property.)
- Legal action related to business or occupational activities in which he or she is named as a defendant.
- Complaint matter or disciplinary review by any government entity or professional organization.
- Employment terminations due to conduct.
- Probation or removal from any graduate program for reasons unrelated to grades.

I have read the reminder of the required disclosures (above) and have submitted the required written disclosures to CCE.

YES  NO

15. Applicant Agreement & Release Authorization:

*All information I provided in this application, including supporting documentation, is accurate and complete to the best of my knowledge. If I have knowledge of any changes concerning my responses in this application, including my responses in the Ethics Attestation, I agree to report this to CCE in writing within 60 days.*

*I agree that CCE has the right to contact any person or organization regarding this application, and I authorize the release of any information requested by CCE to verify the accuracy. I understand that all application materials become the property of CCE and will not be returned.*

*I understand that certification through CCE depends upon my fulfillment of all required criteria and compliance with CCE policies, which include the HS-BCP Code of Ethics and the CCE certification mark and trademark use policy. I understand that certification does not create membership in CCE. I understand that CCE certification is personal to me and may not be transferred to another individual or group.*

*I understand that professional biographical and certification data is considered to be public information and will be made available in response to public inquiries. I agree that data related to my participation in HS-BCP certification may be used for research and statistical purposes.*

*I recognize that any certification granted by CCE does not represent licensure or other authorization to practice business activities for a fee. I release CCE from all liability and claims arising from any professional activity.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Applicant's Name: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE FILL OUT ELECTRONICALLY OR PRINT CLEARLY**

**NOTE: Please see experience verification exemptions on page 4.**

*I am applying to the Center for Credentialing & Education (CCE) for the Human Services-Board Certified Practitioner (HS-BCP) certification. I am required to provide documentation of 350 hours of postdegree work as a human services practitioner. Please complete the information below and return the form to me. My application cannot be processed without this form.*

My degree was conferred \_\_\_\_\_ (mm/dd/yyyy).

Applicant's Signature

Date (mm/dd/yyyy)

\_\_\_\_\_

\_\_\_\_\_

**INFORMATION BELOW TO BE COMPLETED BY EXPERIENCE VERIFIER**

Please complete all information below.

I verify that the applicant named above worked in a human services position from \_\_\_\_\_ (mm/yyyy) to \_\_\_\_\_ (mm/yyyy)

**AFTER completing his/her degree and completed \_\_\_\_\_ total hours of work as a human services practitioner.**

*This applicant was/is employed in the position of*

(job title) \_\_\_\_\_.

Briefly identify and describe all work experience related to human services. \_\_\_\_\_

\_\_\_\_\_

To the person verifying experience: Please provide the following information about yourself.

1. Verifier's name: \_\_\_\_\_

2. Agency/institution where you worked with the applicant: \_\_\_\_\_

\_\_\_\_\_

3. Your title at agency/institution where you worked with the applicant: \_\_\_\_\_

4. Your current telephone number (required): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Verifier's Signature

Date

**Thank you. After you complete this form, please return it to the applicant.**



Applicant's Name: \_\_\_\_\_ Date: \_\_\_\_\_

CCE's Assessment Department will contact you directly regarding special accommodations once you are approved to sit for the HS-BCP Examination.

## Candidates With Disabilities

**NOTE: There is no extra charge for these arrangements.**

Identify briefly the nature of your disability. Attach documentation from a qualified professional. Diagnosis must be included in the documentation. Specify the special accommodations and/or arrangements you will need to complete the HS-BCP Examination. Documentation may not be more than five years old.

*The information I have provided is accurate. I agree to provide any additional information requested by CCE.*

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Candidates for Whom English Is a Second Language

*I request extended time for the HS-BCP Examination because English is not my native language.*

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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