

LICENSED PROFESSIONAL COUNSELORS BOARD OF EXAMINERS

8631 SUMMA AVENUE, SUITE A

BATON ROUGE, LOUISIANA 70809

TELEPHONE (225)765-2515 E-MAIL lpcboard@eatel.net

TRANSCRIPT FORM

Name _____

Dear Applicant:

You must verify that you have completed a separate graduate course in each of the content areas listed below. For a description of the content areas, see Board Rules §§503(a) and 705(A)(2)(c). Please indicate which of the content areas you believe your coursework covers. Place the course number from your transcript on the line next to the content area. If the title of the course does not match the title name on the transcript please include a catalog course description, a copy of the course syllabus, or a letter from the professor who taught the course or a current professor at that university, all courses listed must clearly be shown as graduate credit on the transcript or you will need additional documentation.

Counseling/theories of personality _____

Human Growth and Development _____

Abnormal Behavior _____

Techniques of Counseling _____

Group Dynamics, Processes and Counseling _____

Lifestyle and Career Development _____

Appraisal of Individual _____

Ethics _____

Practicum _____

Internship _____

