



Applicant / Potential Applicant

Self-Referral Attestation

North Carolina Board of Licensed Clinical Mental Health Counselors (Board)
Impaired Professionals Program

The North Carolina Professionals Health Program (NCPHP) is the selected provider for the Board's Impaired Professionals Program.

"Applicant" means a person who has submitted an application to the Board, paid the application fee, and received confirmation of receipt of the application from the Board.

"Potential Applicant" means a person who has completed a qualifying graduate training program and intends to apply for licensure by the Board within two years.

"Impairment" means a condition or disorder caused by substance use, burnout, compassion fatigue, or other mental health issue that hinders professional competence or the ability to provide or supervise clinical mental health counseling services with reasonable skill and safety.

Applicants and Potential Applicants who wish to self-refer to NCPHP, please complete the below attestation.

Attestation (Select ONE):

I have submitted a licensure application to the Board, paid the application fee, and received confirmation of receipt of the application from the Board.

I am a graduate of a program that was CACREP accredited at the time of my graduation AND intend to complete my application for licensure by the Board within two years of this attestation.

Printed Name:

Signature:

Date:

Please bring the signed attestation to your first appointment with NCPHP or email it before your appointment to info@ncphp.org