

Oklahoma Board of Licensed Alcohol and Drug Counselors

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SUBMISSION OF APPLICATION: Your application for LADC/MH may be submitted by mail or in person to the OBLADC in packet form. This means that all forms, university transcript(s) and \$175.00 application fee must be submitted together in one envelope, with notarized application. I am applying for \(\subseteq \text{LADC/MH...LADC # _____ and other Mental Health License # _____ in good Standing, License Type_____ or LADC # _____ and Degree requirements as of 1/1/12 – (Masters Transcript attached) or LADC # and Transcripts to apply for Co-Occurring credential Name: Application Date: Address:_____ (State) (Street or PO Box) (City) (Zip) Home Phone: Cell Phone: Date of Birth: _____ E-Mail: ____ Social Security Number:_____ Work Phone:___ Employer:____ Address:____ (State) Place photo here Have you ever been convicted, pled guilty or nolo contendere to a felony? _____Yes ____No If yes, when? Include documentation with materials submitted. Are you on probation? Yes No Include documentation with materials submitted. *Having a conviction does not automatically disqualify you from obtaining licensure. The Board will make the final decision. Initial, sign and notarize I authorize the Oklahoma Board of Licensed Alcohol and Drug Counselors to conduct a criminal background check and contact any/all references imperative for verification and/or clarification. (Signature) (Printed Name) Signed or attested before me on ____

Notary Seal

Notary signature______ My commission expires:_____