



Oklahoma Board of Licensed Alcohol and Drug Counselors

P O Box 54388
Oklahoma City, OK 73154
Telephone: (405) 521-0779

APPLICATION INVENTORY

(Please attach this form to the front of your completed application material)

Applicant's name: _____ Date: _____

Please check the line beside the appropriate response:

I am applying to become licensed/certified as an: ___ LADC/MH ___ LADC ___ CADC

Forms may be printed from the website in the future.

Inside this packet I have enclosed the following:

- ___ Notarized application form (Form 201)
- ___ The application fee \$175.00
- ___ Personal Philosophy
- ___ Signed Code of Ethics (Form 204)
- ___ Three (3) Professional References. (Form 205)
- ___ Supervision contract. (Form 206)
- ___ Photocopy of personal identification (e.g., current driver's license, passport, etc.)
- ___ Sealed Transcript(s).
- ___ Practicum (Form 209)
- ___ Notarized Affidavit of Legal Status
- ___ This inventory sheet (Form 203)

Please list any additional enclosures in the space below:
