

Post-Graduate Supervisory Agreement - Supervisee - Step 1

To begin the Post-Graduate Supervisory Agreement process, (1) click Forms in the menu and then (2) click Online under Post-Graduate Supervisory Agreement Form

The screenshot shows the MS LPC Board website interface. On the left is a blue navigation menu with the following items: Statute and Rules, Board Information, Licensee Search, Filing a Complaint, Forms, Affiliated Links, MS Licensure Requirements (How to sit for exam.), Frequently Asked Questions, and Login. The main content area at the top right displays the date: "Today is: Wednesday, October 29, 2014". Below the date, there is a notice: "If submitting forms to the MS LPC Board Office, please be certain to use the Jackson, MS, address listed below." and a link for "Fee Schedule". The central section is titled "Application for LPC **Revised 5.6.14" and offers two options: "Paper" (with a document icon) and "Online" (with a computer icon). A red text box next to the "Online" option states: "Before you proceed to the online application you should print and review the paper application to ensure that you have all the documentation that is required." Below this is the "Post-Graduate Supervisory Agreement Form" section, which has an "Online" link (with a computer icon) and a description: "The online process creates your profile and uses electronic signatures to complete the agreement. Instructions". At the bottom of this section is the "Supervision Reporting Form" with a "Paper" link. On the right side of the page is a "Quick Links" section with "Rules and Regulation" and "Other" sub-sections, including "MS Transparency". The Great Seal of the State of Mississippi is visible in the bottom left corner of the page.

Post-Graduate Supervisory Agreement - Supervisee - Step 2

Enter your social security number and the security code. This is a check to verify that you do not already have a profile in the system.

Home Site Map Contact Us	
Statute and Rules	Today is: Wednesday, October 29, 2014
Board Information	Check for Existing Profile
Licensee Search	Enter your SSN <input type="text"/>
Filing a Complaint	Enter this security code in the box below: 47842
Forms	<input type="text"/>
Affiliated Links	<input type="button" value="Check"/>
MS Licensure Requirements (How to sit for exam.)	
Frequently Asked Questions	
Login	

Post-Graduate Supervisory Agreement - Supervisee - Step3

As the supervisee, you enter your information to create your profile.

When your profile is created, you login to your profile and continue the agreement process.

MISSISSIPPI STATE BOARD OF EXAMINERS FOR LICENSED PROFESSIONAL COUNSELORS
239 North Lamar Street • Suite 402 • Jackson, MS 39201
www.lpc.ms.gov

POST-GRADUATE SUPERVISORY AGREEMENT FORM

PLEASE READ BEFORE COMPLETING. As of January 1, 2012, the Board Qualified Supervisor and the supervisee receiving supervision in pursuit of becoming a Licensed Professional Counselor in the State of Mississippi must complete this form and submit it to the LPC Board Office along with a copy of your supervisor contract **PRIOR** to beginning supervision. Complete a separate form for each supervisor. Refer to LPC Board Rule 4.4.

This document verifies and documents the establishment of a supervisory relationship between the Board Qualified Supervisor and a supervisee. It also outlines the minimum standards necessary to fulfill the licensing requirements. The supervisor and the supervisee should complete a separate contract that comprehensively outlines the supervisory relationship in addition to completing this document.

SUPERVISEE INFORMATION

Name:
Title First Name Middle Last Name Suffix

(This should be your legal name as it should appear on certificate)

Name(s) as shown on transcripts and/or exam records if different from above:

PREFERRED PHONE NUMBER: HOME BUSINESS CELL

HOME PHONE: BUSINESS PHONE: CELL:

EMAIL ADDRESS: Password:

DATE OF BIRTH:  SOCIAL SECURITY NUMBER:

If granted a license, your name, preferred address, preferred phone number, email address, and license number will appear on the internet.
You must immediately notify the Board in writing of any changes of information.

PREFERRED ADDRESS: HOME BUSINESS

HOME ADDRESS: Mississippi
Street (**P.O. Box not acceptable) City State Zip code

LPC Profile Management - Login Step 1

Website URL <http://www.lpc.ms.gov/>

Click the Login button at the bottom of the menu to go to the login screen.



lpc.ms.gov
MISSISSIPPI
State Board of Examiners for Licensed Professional Counselors

[Home](#) [Site Map](#) [Contact Us](#)

Statute and Rules	Today is: Wednesday, August 06, 2014	Quick Links
Board Information	If you did not submit your renewal form prior to June 30, 2014 your license is now "Lapsed."	Rules and Regulations
Licensee Search	Please complete the "Lapsed License Renewal Form" to reinstate your license to "Current" Status and submit appropriate fees and CE Reporting Forms to Board Office.	Other
Filing a Complaint	New!	MS Transparency
Forms	2014 Biennial License Renewal	
Affiliated Links	2014 License renewal forms have been mailed out. Please be aware, however, that failure to receive this notification does not relinquish your responsibility for timely renewal. Renewal forms must be returned to the LPC Board office PRIOR to June 30, 2014, to remain Active Status.	
MS Licensure Requirements (How to sit for exam.)	Visit the "Forms" section (on the left) to find the Lapsed License Renewal Form and CE Reporting Form. NOTE: Board Qualified Supervisors must submit the appropriate renewal fee.	
Frequently Asked Questions	Click on the link above for details about requirements for CEHs or visit the "Frequently Asked Questions" section.	
Login	Welcome to Mississippi Board of Examiners for Licensed Professional Counselors	
	Welcome to the website of the Mississippi Board of Examiners for Licensed Professional Counselors. We hope that this site supplies you with all the information you need to become licensed or continue your licensure in the State of Mississippi.	

LPC Profile Management - Login Step 2

Enter your email address and password.

If you do not remember your password, click the "I don't remember my password" link. You will then enter your email address and your password will be emailed to you.

If this is your first time to login, you will be required to change your temporary password.

The screenshot shows the website header with the logo "lpc.ms.gov MISSISSIPPI" and the text "State Board of Examiners for Licensed Professional Counselors". Navigation buttons for "Home", "Site Map", and "Contact Us" are visible. A sidebar on the left contains a menu with items: "Statute and Rules", "Board Information", "Licensee Search", "Filing a Complaint", "Forms", "Affiliated Links", "MS Licensure Requirements", "Frequently Asked Questions", and "Login". The main content area displays the date "Today is: Wednesday, August 06, 2014" and the "Licensee Login" section. This section includes input fields for "Email:" and "Password:", a "Submit" button, and a link "I don't remember my password." with a question mark icon. A disclaimer text is present below the login fields, and a footer contains the website disclaimer, address (239 North Lamar Street, Suite 402, Jackson, MS 39201), contact information (Office: 601 359-1010, Fax: 601 359-1030), and a link to the "Transparency Mississippi Management and Reporting System". An Adobe Reader logo is also present in the footer.

LPC Profile Management - Profile Overview

When you login, you will be taken to your profile. Your profile shows your information that is stored in the LPC system.

- There are certain fields that you can use to update your information. (example: Home and Business Address, Phone Numbers, Email, Password)
- If you have met all the requirements for online renewal, you can renew your license and pay your fees online.
- You can also add your picture to your profile.

The following screens will show you how to use your profile.

State Board of Examiners for Licensed Professional Counselors

Today is: Wednesday, October 29, 2014

NOTICE!
Your picture should be passport size, about 200px wide and a maximum of 500KB. If it is larger than this you will receive an error and NOT be able to save your information!

License No.: 0
Last Name: aJones-test
First Name: Lisa
Middle or MI: Miinor
Title: Mr.
Suffix:
SSN: 968-53-5709
DOB: 2014-10-02

Save Changes Logout

Password: 1234
Name(s) as shown on transcripts and/or exam records if different from what's to the left:
Lisa Jones-test
Nick name or informal name:

Choose File No file chosen

General Registration Education App Info Complaints Payments Print Forms Online Payments

LPC Profile Management - Profile - Tabs

About the middle of the screen is a row of tabs that contain groups of information. When you click on one of these tabs you will see your information for that area.

The tabs Complaints and Payments are informational only. The Online Payments tab allows you to pay certain fees online.

General Registration Education Notes And App Info Complaints Payments Print Forms Online Payments

General Registration

Home Address Business Address

Post-Graduate Supervisory Agreement - Supervisee - Step 4

To complete your portion of the Post-Graduate Supervisory Agreement, click on the App Info tab. On that tab you will see the button: Complete Post-Graduate Supervisory Agreement

General Registration Education **App Info** Complaints Payments Print Forms Online Payments

App Info

Tracking: (Date Received)
Background Check: Transcripts: School Date

NBCC Exam

Verification of lic in other jurisdiction:
Verification Notes:

Application Information

Complete License Application

When you have completed your work experience, you may use this button to fillout your online application.

Complete Post-Graduate Supervisory Agreement View Supervised Work Experience - Worksheet

No Supervised Experience Entered.

Post-Graduate Supervisory Agreement - Supervisee - Step 5

When you click the Post-Graduate Supervisory Agreement button on your profile, you will be taken to the screen below. Here you will select the counselor that has agreed to be your Board Qualified Supervisor.

After you finish the next screen, this counselor will receive an email asking them to concur or decline the agreement.

The dropdown list will show only counselors that are Board qualified.

State Board of Examiners for Licensed Professional Counselors

Today is: Friday, August 08, 2014

**Your supervisor must be a Board Qualified Supervisor.
Please select your supervisor from the list below.**

If the counselor is not on the list please contact the
LPC Board office as per the information below.

[Return to Profile](#)

Post-Graduate Supervisory Agreement - Supervisee - Step 6

Fill out the form below to complete your part of the agreement process.

You must check the box that says I affirm. Then you must click on Add. The BQS counselor you have chosen will receive an email notifying them to concur or decline being your supervisor. They must login to their profile to complete the process.

Today is: Friday, August 08, 2014

INFORMATION RELATED TO SUPERVISED EXPERIENCE

Name of organization or agency where experience will be gained (Complete separate form for each setting):

Address of organization or agency: Mississippi
Address City State Zip

Following table contains the ANTICIPATED dates and hours.

Start Date: <input type="text"/>	End Date: <input type="text"/>
Total Hours Per Week: <input type="text"/>	Direct Contact Hours Per Week: <input type="text"/>
Individual Supervision Per Week: <input type="text"/>	Group Supervision Per Week: <input type="text"/>

SUPERVISEE AFFIRMATION

I, as supervisee, affirm that all information provided by me on this form and in my profile is true and accurate and I affirm the following:

- That I have read the Board Rules & Regulations related to supervised experience and that all supervised experience will be completed in accordance with the Board Rules & Regulations.
- That I will meet with my supervisor at least one hour per 25 hours or standard work-week of documented supervised experience.
- That I will abide by all rules of the Board, including ACA ethics requirements.
- That I understand that I am practicing under the license of a Mississippi Board Qualified Supervisor, and I do not have authority to engage in the independent practice of counseling.
- That I will notify the Board if this supervisory arrangement is terminated.
- That it is my responsibility to know whether or not my supervisor is a Board Qualified Supervisor.
- That I understand any additional supervisors and settings must be filed with the Board in advance.

Post-Graduate Supervisory Agreement - Supervisee - Step 7

When you and your supervisor have completed the agreement process, the information will be displayed in the App Info tab. You may upload the signed contract with the button at the bottom of the information or mail a copy to the Board office. You may also fillout the Supervision Reporting Log online. After you have input your information for a specific week, your supervisor will approve it online from their profile.

POST-GRADUATE SUPERVISOR INFORMATION (Started on 10/27/2014)			
Name:	Kevin First	James Middle or MI	Atest1 Last
MS BQS Certificate #:	140	Issued:	2014-10-27
MS LPC License #:	0	Issued:	Expiration Date:
Preferred Mailing Address:	92 Some St Address	Birmingham City	MS State
Telephone #:	(205) 888-7477	Email:	home@pamnoelstudio.com
			39564 Zip
INFORMATION RELATED TO SUPERVISED EXPERIENCE			
Name of organization or agency where experience will be gained (Complete separate form for each setting): Casa health			
Address of organization or agency: 13 some st, Clinton, MS 39056			
Following table contains the ANTICIPATED dates and hours.			
Start Date: 2014-10-27		End Date: 2014-10-27	
Total Hours Per Week: 40		Direct Contact Hours Per Week: 10	
Individual Supervision Per Week: 10		Group Supervision Per Week: 10	
Type of Setting: Private Practice <input type="radio"/> Hospital <input type="radio"/> School <input type="radio"/> Volunteer <input type="radio"/>			
Government Agency <input type="radio"/> Nonprofit <input type="radio"/> Other <input type="radio"/> (describe: <input type="text"/>)			
Type of Counseling Experience/Scope of Practice To Be Gained (Check all that apply) General <input type="checkbox"/> Group <input type="checkbox"/>			
Marriage & Family <input type="checkbox"/> Drug & Alcohol <input type="checkbox"/> Career & Vocational <input type="checkbox"/> Rehabilitation <input type="checkbox"/> Academic <input type="checkbox"/>			
Child & Adolescent <input type="checkbox"/> Art Therapy <input type="checkbox"/> Other <input type="checkbox"/> (describe <input type="text"/>)			
<input type="button" value="Upload Contract"/>		<input type="button" value="Prepare Supervision Reporting Log"/>	

Post-Graduate Supervisory Agreement - Supervisee - Step 8

Today is: Wednesday, October 29, 2014

SUPERVISION REPORTING LOG

Direct and Indirect Services

Supervisor: Kevin James Atest1

Supervisee: Forest atest

Place of Employment/Internship: Casa health

Categories include: CON=Consultation; CN=Case Notes; ST=Staffing; CM=Case Management; TP=Treatment Planning; COUN=Counseling; ASSESS=Assessment.
Report in Hours e.g. 1, 2, 3.75, etc

Dates Week of:	CON	CN	ST	CM	TP	Coun (Group or Individual)	ASSESS	Total Supervised Hours	Individual Supervision Hours	Group Supervision
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>					

[Add](#)

[Return to Profile](#)

Reports from Previous Weeks

Dates Week of:	CON	CN	ST	CM	TP	Coun (Group or Individual)	ASSESS	Total Supervised Hours	Individual Supervision Hours	Group Supervision
2014-10-26 Approval Needed	3	4	5	6	7	3	5	37	4	5
Total Hours	0	0	0	0	0	0	0	0	0	0

Missouri State Board of Examiners for Licensed Professional Counselors/Behavioral Disordered

Post-Graduate Supervisory Agreement - Supervisor Step 1

BQS counselors will see a list of those they are supervising and those who have requested them as a supervisor at the bottom of the General Registration tab.

1. Once you have concurred, you will be able to fillout the Supervision Reporting Log online or have the supervisee complete.
2. When you have completed the supervision, you click the End Supervision button to remove that person from your profile. A BQS may only have up to 10 active supervisees at one time.
3. When a person fills out the Post-Graduate Agreement online, their information will be shown for you to either concur or decline. If you click concur, you will be taken to the Supervisor Affirmation page to check the affirmation box.

General Registration
Education
App Info
Complaints
Payments
Print Forms
Online Payments

General Registration

PUBLISHED ADDRESS (Public): HOME BUSINESS DO NOT PUBLISH

PUBLISHED PHONE NUMBER: HOME BUSINESS CELL DO NOT PUBLISH

BOARD CORRESPONDENCE: HOME BUSINESS

Home Address	Business Address
<p>Address: <input type="text" value="88 High lane"/></p> <p>Address 2: <input type="text"/></p> <p>City, St Zip: <input type="text" value="Flowwood"/> <input type="text" value="Alabama"/> <input type="text" value="35242"/></p> <p>Phone: <input type="text" value="(205) 888-7477"/> Cell Phone: <input type="text" value="(120) 408-5207"/></p> <p>Email: <input type="text" value="45t@3.com"/></p> <p>Home Fax: <input type="text"/></p> <p>County: <input type="text" value="Select"/></p>	<p>Employer: <input type="text"/></p> <p>Address: <input type="text" value="92 Some St"/></p> <p>Address 2: <input type="text"/></p> <p>City, St Zip: <input type="text" value="Birmingham"/> <input type="text" value="Mississippi"/> <input type="text" value="39564"/></p> <p>Phone: <input type="text" value="(205) 888-7477"/> FAX: <input type="text"/></p> <p>Business Email: <input type="text"/></p> <p>Employment Type: <input type="text"/></p> <p>Employment Desc.: <input type="text"/></p>

Registration Information

Status		BQS
Active		<input checked="" type="radio"/> Yes <input type="radio"/> No
Original Issue Date	Expiration Date	BQS No. 140
	2015-06-30	BQS Date
		2014-10-27
Specialty Area:	<input type="text"/>	

Supervisor for:

Forest atest - From: 2014-10-27 To 2014-10-27	<input type="button" value="End Supervision"/>
<input type="button" value="Prepare Supervision Reporting Log"/>	
Lisa aaJones-test - From: 2014-10-01 To 2014-10-30	<input type="button" value="Concur"/> <input type="button" value="Decline"/>

Post-Graduate Supervisory Agreement - Supervisor Step 2

Today is: Friday, August 08, 2014

Jim Henry Test
has indicated that you have agreed to
be their supervisor until their training is completed.
They have entered an anticipated start date of 2014-09-01
and an anticipated complete date of 2015-08-31

If you concur you must check the I affirm box and then click the Yes button below.

SUPERVISOR AFFIRMATION

I, as the Mississippi Board Qualified Supervisor of the above named supervisee, affirm that all information provided by me on my profile is true and accurate, and I affirm the following:

- That all supervised experience will be completed in accordance with Board Rule 4.3(A) of the Rules and Regulations related to supervised experience and all subsequent Board rules.
- That I will provide supervision to the above named supervisee at least one hour for each 25 hours or standard work-week of documented experience.
- That I understand the full professional responsibility for services provided by the supervisee shall rest with the supervisor.
- That I understand that the supervisee cannot engage in the independent practice of counseling until he or she obtains a professional license.
- That I understand the supervisory arrangement is only valid while my license remains current.
- That I will notify the Board if the supervisory arrangement is terminated.
- That I will keep my supervisor status current and that it is my responsibility to inform the supervisee should my supervisor status lapse.

Yes

Later

Decline

If you click Yes, the LPC Board will receive an email notifying them that you concur with this request.

Post-Graduate Supervisory Agreement - Supervisor - Supervision Reporting Log

This log may be prepared by either the supervisee or supervisor. If it is prepared by the supervisee, the week will be highlighted for the supervisor to approve.

<i>SUPERVISION REPORTING LOG</i>										
Direct and Indirect Services										
Supervisor: Kevin James Atest1						Supervisee: Forest atest				
Place of Employment/Internship: Casa health										
Categories include: CON=Consultation; CN=Case Notes; ST=Staffing; CM=Case Management; TP=Treatment Planning; COUN=Counseling; ASSESS=Assessment. Report in Hours e.g. 1, 2, 3.75, etc										
Dates Week of:	CON	CN	ST	CM	TP	Coun (Group or Individual)	ASSESS	Total Supervised Hours	Individual Supervision Hours	Group Supervision
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="button" value="Add"/>						<input type="button" value="Return to Profile"/>				
Reports from Previous Weeks										
Dates Week of:	CON	CN	ST	CM	TP	Coun (Group or Individual)	ASSESS	Total Supervised Hours	Individual Supervision Hours	Group Supervision
2014-10-26 <input type="button" value="Approve"/>	3	4	5	6	7	3	5	37	4	5
Total Hours	0	0	0	0	0	0	0	0	0	0