

MONTANA BOARD OF BEHAVIORAL HEALTH

**SUPERVISION AGREEMENT for
social work, professional counselor marriage and family therapists and addiction
counselor candidates. (SWLC, PCLC, MFLC, ACLC)**

The Montana Board of Behavioral Health application for all credentials requires completion & submission of a Supervision Agreement. Please submit this form along with the candidate application. Mailed to the Board of Behavioral Health at 301 South Park, 4th Floor, P.O. Box 200513, Helena, MT 59620-0513 or it may be submitted via the on-line application at <https://ebiz.mt.gov/pol/default.aspx> and click on Register now.

In accordance with ARM 24.219.504(f)(i-iii) The Supervision Agreement is between the licensure candidate and supervisor. The agreement must include the duties and obligations of the candidate and the supervisor. The agreement also includes a statement of compliance with applicable patient privacy laws, frequency and method of supervision, duration and termination of the supervision agreement. All supervisors must meet the qualifications as a supervisor according to ARM 24.219.421. Candidates shall have a supervision agreement with each supervisor providing supervision during the process of accruing work experience hours.

Employee is seeking licensure as: LCPC LCSW LMFT LAC

Applicant Name:	Supervisor Name:
	Licensure status:
Applicant eligibility date: (date education completion)	Supervisor eligibility date:
Projected start date :	
Location:	Location:

PLEASE PROVIDE THE TERMS OF THE SUPERVISORY AGREEMENT:

Duties and obligations of the candidate: _____

Duties and obligations of the supervisor: _____

Frequency of supervision: _____

Duration of supervision: _____

Method of supervision: _____

Termination provision: _____

In signing below, the candidate and the supervisor attest to the terms of the agreement, compliance with applicable patient privacy laws, confirmation that the qualifications of the supervisor are in accordance with ARM 24.219.421, the understanding that the licensure candidate and supervisor are responsible for ensuring that the licensure candidate and supervisor comply with the requirements of their respective profession at all times; ARM 24.219.504 social work, ARM 24.219.604 professional counselor, ARM 24.219.704 marriage and family therapy, and ARM24.154.409 LAC.

I have read, understand and acknowledge the requirements of the Supervision Agreement as stated.

Candidate's Signature

Date

Clinical Supervisor Credential and Signature

Date