

# BCPPC RENEWAL APPLICATION, ATTESTATION, AND AGREEMENT

Thank you for your interest in maintaining a BCPPC credential through the renewal process. Please complete and **PRINT** all information that is requested in a legible manner or mark N/A if not applicable. Illegible and/or incomplete applications with missing information will be returned to the applicant. Please **fill in all sections**, even if you are attaching supportive documentation.

The BCPPC will not disclose the confidential information given in this application without your express, written consent. Applicants who receive a core credential through the BCPPC and elect to participate in the AACC's comprehensive Christian Care Network understand that certain contact information (**only business related and not personal**), along with other pertinent demographic information (gender, age, ethnicity, years of experience, credentials, areas of specialization, etc.), may be listed in resource directories in order to assist those seeking help in making appropriate and/or desired choices for care. **Please allow 2-3 weeks for processing.**

## **I. Demographic Information Update**

*Please complete the following so we can ensure that our records are current.*

_____		_____		_____	
Last Name		First Name		MI	
_____					
Home Address					
_____					
_____		_____		_____	
City		State		Country	
_____					
Name of Practice/Organization/University/Church, etc., where you work and/or provide counseling/caregiving services					
_____					
Business Address					
_____					
_____		_____		_____	
City		State		Country	
_____					
_____			_____		
Work Phone			E-Mail Address		
_____					
_____			_____		
Fax			Secondary/Emergency Phone		
_____					
_____			_____		
Cell Phone ( <i>optional</i> )			Home Phone ( <i>optional</i> )		

## **II. Continuing Education Attestation**

Please **check the appropriate box below** indicating that you have completed the required number of Continuing Education hours for the BCPPC Credential level you have received. **Please do not send any supportive documentation for CE hours unless it is specifically requested or you are audited.**

- I attest that I have completed the required **20 hours** of Continuing Education (from Category #1 and/or #2) necessary to maintain my **BCPCC** (Board Certified Professional Christian Counselor) credential and that these hours incorporated biblical principles and counseling skills with clinical theory, knowledge, and practice. I further understand that I may be audited by the BCPPC Credentialing Board at any time and asked to provide supportive documentation for my CE hours.
- I attest that I have completed the required **20 hours** of Continuing Education (from Category #1 and/or #2) necessary to maintain my **BCCC** (Board Certified Christian Counselor) credential and that these hours incorporated biblical principles and counseling skills with clinical theory, knowledge, and practice. I further understand that I may be audited by the BCPPC Credentialing Board at any time and asked to provide supportive documentation for my CE hours.
- I attest that I have completed the required **20 hours** of Continuing Education (from Category #1 and/or #2) necessary to maintain my **BCPC** (Board Certified Pastoral Counselor) credential and that these hours incorporated biblical principles and counseling skills with clinical theory, knowledge, and practice. I further understand that I may be audited by the BCPPC Credentialing Board at any time and asked to provide supportive documentation for my CE hours.
- I attest that I have completed the required **20 hours** of Continuing Education (from Category #1 and/or #2) necessary to maintain my **BCBC** (Board Certified Biblical Counselor) credential and that these hours incorporated biblical principles and counseling skills with clinical theory, knowledge, and practice. I further understand that I may be audited by the BCPPC Credentialing Board at any time and asked to provide supportive documentation for my CE hours.

**III. Professional Mental Health License and/or Certification**

If you are a BCPCC credential holder and a licensed mental health professional, please list your license and/or certification status. Identify the licensing or regulatory board that issued the professional license and/or certification. ATTACH A COPY of *each* current license and/or certification showing the expiration date.

- N/A (I do not have a professional mental health license or certification.)

<i>License Type</i>	<i>State of Issue</i>	<i>Date Issued</i>	<i>Exp. Date</i>

**IV. Professional Liability Insurance**

If you have or are required to maintain liability insurance (typically this is true for the **BCPCC level**), please provide information regarding your professional and/or ministerial liability/malpractice insurance. ATTACH A COPY of your current policy face sheet (*must show a minimum of \$1 million/\$3 million coverage*).

- N/A (I do not work/minister in a setting that requires me to have liability/malpractice insurance.)

Carrier \_\_\_\_\_ Policy # \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

Effective Date \_\_\_\_\_ Expiration Date \_\_\_\_\_

Coverage Per Incident/Occurrence \_\_\_\_\_ Per Aggregate \_\_\_\_\_

Name of Policy Holder \_\_\_\_\_

**V. General Practice Attestation**

Each applicant must demonstrate and maintain ethical integrity in all counseling, ministerial, and professionally related activities. Please note that a "Yes" answer to questions 1-6 will not necessarily disqualify you for credential renewal. If the case has been properly remedied and/or disposed of, and you are under no current ethical complaint or investigation, then the application process can proceed.

1. Since your initial credential or last renewal, have you been sued and/or lost (a civil malpractice action), or been criminally indicted for any actions related to your professional and/or ministerial practice?

Yes       No

2. Since your initial credential or last renewal, have you had any professional or ministerial license revoked or suspended or had any sanctions attached to it for any actions related to your professional and/or ministerial practice?

Yes       No       N/A

3. Since your initial credential or last renewal, have you had your membership with any professional association suspended or sanctioned in any manner for any actions related to your professional and/or ministerial practice?

Yes       No       N/A

4. Since your initial credential or last renewal, has a client or colleague complained about you and/or your practice with them to the extent that your practice has been suspended or more closely monitored by your employing agency, practice/ministerial supervisor, regulatory/oversight board, etc.?

Yes       No

5. Since your initial credential or last renewal, has a complaint of any kind been lodged against you regarding your professional and/or ministerial practice, even though no formal legal, ethical, or organizational action resulted from such complaint?

Yes       No

6. Since your initial credential or last renewal, have you been charged with or convicted of any misdemeanor or felony other than minor moving violations in a vehicle?

Yes       No

*If you answered "Yes" to any of the above questions in this section (only 1-6), please attach an explanation (1-2 pages per incident) that describes in detail the case, its disposition and/or your position on the matter.*

7. I attest and affirm that I have read the latest version of the *AACC Christian Counseling Code of Ethics* and that I will promise, to the best of my abilities, to fully adhere to and advance the tenets of this document.

Yes       No

8. I understand and consent that should I violate nationally recognized ethical standards, including the AACC Christian Counseling Code of Ethics, I may be subject to disciplinary action, up to the loss of my status as an BCPPC credential holder

Yes       No

## VI. Renewal Agreement

Please *check each box below* indicating that you have read, understood, and consented to the statement.

**CERTIFICATION.** I hereby certify that all the information in this entire renewal application is true and complete. I understand that I have the burden of producing all the information necessary for the BCPPC to fairly and fully evaluate my qualifications, background, ethics, and character in order to be considered for the renewal of my BCPPC credential. I understand and agree to inform the BCPPC as quickly as possible of any changes in this information. I agree that any misstatement or omission from this renewal application may be cause for denial of reappointment to the credential. I further agree that any subsequent adverse information about me or my practice and/or a violation of the *AACC Christian Counseling Code of Ethics* may be cause for disciplinary action – including the possibility of permanent expulsion from holding the credential – and that such action may be publically communicated in any form or forum the BCPPC chooses to disclose such information.

**AUTHORIZATION.** I hereby authorize and give my consent to the BCPPC to contact and, without restriction, discuss any issues pertaining to my character and qualifications with current and former supervisors, administrators, pastors, and/or other colleagues with whom I have worked. I authorize the BCPPC to contact any state licensure boards, other professional and ministerial associations, and malpractice insurance carriers to obtain whatever information it deems necessary to properly evaluate this renewal application. I hereby consent to the release of all information, records, and documents, by whatever means the BCPPC chooses to collect this data, and to assist them in the good-faith evaluation of my renewal application. If a question arises in the future about my character and qualifications to the credential, I agree to assist the BCPPC in its efforts to resolve any questions it may have about me. I further agree and consent to allow a copy of this agreement to be sent to anyone whom the BCPPC deems necessary to assist them in resolving any and all questions about my worthiness to achieve and hold a BCPPC credential.

**INDEMNIFICATION.** I release from any and all liability the BCPPC, the AACC, the AACC Foundation, and any individual officers, directors, employees, or agents of these organizations for any and all acts done in good faith and without malice or intent to harm in connection with the evaluation of the renewal application for my BCPPC credential. I further release from any and all liability, any persons or organizations that release information regarding this renewal application to the BCPPC, and agree to hold harmless anyone who may make a negative or adverse judgment about my character or qualifications during the evaluation process.

**DISPUTE RESOLUTION.** If a dispute arises between me and the BCPPC regarding this renewal application or any future matter, I agree to engage in dispute resolution that (1) first attempts direct negotiation; (2) then attempts mediation with a mediator acceptable to both parties; (3) then uses arbitration and binding arbitration to resolve the matter. The parties agree to abide by the Christian mediation rules of the Christian Conciliation Service (at [www.hispeace.org](http://www.hispeace.org)) and the administrative rules and procedures of the American Arbitration Association for binding arbitration. The chosen rule of law and forum state shall be the Commonwealth of Virginia.

**CREDENTIAL RESOLUTION.** I resolve to support the mission and goals of the BCPPC and I further agree to abide by and fully adhere to the *AACC Doctrinal Statement*, the *AACC Christian Counseling Code of Ethics*, and the *BCPPC Statement on Professional Christian Counseling*. I have not hidden, nor have I omitted any necessary information to honestly qualify for this credential. If I am reappointed, I will hold my BCPPC credential in the highest regard, honor the calling of God in Christian counseling, and maintain both excellence and an ethical stance as a servant-leader in this field. Furthermore, I will strive to avoid all stain of bad reputation and ill-repute upon the name of Christ, the cause of Christian counseling, and the good purposes of the BCPPC.

I, the undersigned, have read, discussed as needed, and fully understand this ***Renewal Application, Attestation, and Agreement***. I understand that by signing this document, I do hereby agree with all consent and authorization statements that are described herein.

---

Applicant Signature

---

Date