



Licensed Behavioral Practitioners
 Licensed Marital and Family Therapists
 Licensed Professional Counselors

State Board of Behavioral Health Licensure

3815 N. Santa Fe, Ste. 110
 Oklahoma City, OK 73118
 Telephone: (405) 522-3696
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www.ok.gov/behavioralhealth

CONTINUING EDUCATION ROSTER
 for the
RENEWAL of LMFT APPROVED SUPERVISOR STATUS

Name: _____ License No: _____

Signature: _____ Date: _____

Total Clock hours: _____

Supervisor qualifications

Approved LMFT Supervisors are required to complete a minimum of three (3) clock hours of continuing education in counseling supervision each renewal period.

Please provide the requested information for Continuing Education hours earned and submit this roster along with your annual renewal roster and renewal fee. Fraudulent submission of continuing education may result in disciplinary action against you.

Only use this form to document continuing education for the renewal of your approved supervisor status

1. Workshop/Graduate Course: _____

Sponsor/University: _____ Date/Semester _____ Hours: _____

2. Workshop/Graduate Course: _____

Sponsor/University: _____ Date/Semester _____ Hours: _____

3. Workshop/Graduate Course: _____

Sponsor/University: _____ Date/Semester _____ Hours: _____

4. Workshop/Graduate Course: _____

Sponsor/University: _____ Date/Semester _____ Hours: _____

5. Workshop/Graduate Course: _____

Sponsor/University: _____ Date/Semester _____ Hours: _____

6. Workshop/Graduate Course: _____

Sponsor/University: _____ Date/Semester _____ Hours: _____

7. Workshop/Graduate Course: _____

Sponsor/University: _____ Date/Semester _____ Hours: _____