



## MCAP/CAP/ CPP Related Degree Equivalency Review Policy

1. Master's Level Certified Addiction Professional (MCAP), Certified Addiction Professional (CAP) and Certified Prevention Professional (CPP) applicants who hold a degree that may be related, but is not specified on the FCB's list of related degrees may request a MCAP/CAP/ CPP Related Degree Equivalency Review. Equivalency reviews are conducted by FCB management staff.
2. CAP/ CPP Formal Education Requirement. All Certified Addiction Professional (CAP) applicants must hold a minimum of a bachelor's degree in a related field from an accredited college or university. Related degrees are:
  - a. Addiction Studies/Counseling
  - b. Art/Dance Therapy
  - c. Behavioral Healthcare
  - d. Child Development/Family Relations
  - e. Counseling/Guidance
  - f. Criminal Justice
  - g. Divinity/Religion/Theology (only with a concentration in counseling)
  - h. Drama/Expressive Arts Therapy
  - i. Gerontology
  - j. Health Education
  - k. Health Sciences
  - l. Human Services
  - m. Marriage and Family Counseling
  - n. Medicine
  - o. Mental Health Counseling
  - p. Music Therapy
  - q. Nursing
  - r. Occupational Therapy
  - s. Pastoral Counseling
  - t. Pharmacy/Pharmaceutical Sciences
  - u. Psychology
  - v. Public Health
  - w. Recreational Therapy/Counseling
  - x. Social Work
  - y. Sociology
  - z. Vocational Counseling
3. MCAP Formal Education Requirement. All Master's level Certified Addiction Professional (MCAP) applicants must hold a master's degree or higher in a related field from an accredited college or university. Related degrees are:
  - a. Counseling, to include:
    - Addiction Studies/Counseling
    - Marriage and Family Counseling
    - Mental Health Counseling
    - Pastoral Counseling
    - Rehabilitation Counseling
    - Recreational Therapy/Counseling
  - b. Psychology, to include:
    - Art Therapy
    - Music Therapy
    - Expressive Arts Therapy
  - c. Social Work
  - d. Advanced Nurse Practitioner with psychiatric specialty
4. Related Degree Equivalency Reviews are approved, dismissed or denied by the FCB President/CEO; the Director of Operations; and/or the Director of Certification. The decision is final and not subject to appeal.
5. Fee: \$25.00
6. Application Requirements
  - a. Complete MCAP/CAP/ CPP Related Degree Equivalency Review Application;
  - b. Submit unofficial transcript and official course descriptions and/or syllabus for relevant coursework; and
  - c. Pay \$25 fee.



## **MCAP/CAP/CP Related Degree Equivalency Review Policy**

### **Suggestions for Preparing your MCAP/CAP/CP Related Degree Equivalency Review Application**

General Guidance: Applicants should review all requested information prior to preparing the equivalency request. If the request does not include sufficient information, the FCB will require that information be submitted before a decision can be made. If sufficient additional information is not provided, the FCB may deny or dismiss the request.

#### Related Degree Equivalency Review Guidance:

It is recommended that your equivalency review application includes:

1. A clear explanation of why your degree should be considered a “related degree” for certification purposes. Ensure your description includes discussion on how your coursework prepared you to work in the field of health and human services.
2. An unofficial copy of your transcript and copies of official course descriptions and/or syllabus for relevant coursework.
3. A current resume, to include specific job titles, dates of employment, employers, responsibilities, and a description of programs/clients served.
4. Any additional information or documentation that you believe demonstrates that your degree is equivalent to the FCB identified related degrees for certification purposes.

#### **Submit your application, fee payment and all attachments to:**

Director of Certification  
Florida Certification Board  
1715 South Gadsden Street  
Tallahassee, Florida 32301

Related



# CAP/MCAP Degree Equivalency Review Policy

## Section 1: Contact and Demographic Information.

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Primary Phone Number

\_\_\_\_\_  
Primary Email Address

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip code

\_\_\_\_\_  
County

## Section 2: Degree Information. Provide information for the degree you are seeking an equivalency review.

Credential Sought:     MCAP     CAP     CPP

Degree Type:             BA/BS     MA/MS/MEd     PhD     MD/DO     JD     Other

Degree Field: \_\_\_\_\_

Month/Year of Graduation: \_\_\_\_\_

School Name: \_\_\_\_\_

School Location: \_\_\_\_\_

City

State

Is the name on your transcript the same as on this application?

Yes     No\*

If "no," what name is on your transcript?\*

\_\_\_\_\_ \*attach a copy of official name change documentation

## Section 3: Equivalency Review Application Checklist. Identify each document included in your application.

- Unofficial transcript
- Official course descriptions and/or syllabus for relevant coursework
- \$25 fee
- Other (please specify) \_\_\_\_\_

## Section 3: Signature

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

Printed Name \_\_\_\_\_

### For FCB Use Only

- Equivalency approved
- Equivalency denied
- Pending additional information (describe): \_\_\_\_\_

FCB Management Signature \_\_\_\_\_

Date \_\_\_\_\_

Printed Name \_\_\_\_\_