



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.



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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 _____