



# Florida Certification Board

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

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### PROCESS

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*. All equivalency reviews are reviewed, approved or denied by FCB management staff. The decision is final and not subject to appeal.

### CAP/ CPP FORMAL EDUCATION REQUIREMENT

All CAP and CPP 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   | n. Medicine                         |
| b. Art/Dance Therapy  | o. Mental Health Counseling         |
| c. Behavioral Healthcare  | p. Music Therapy                    |
| d. Child Development/Family Relations                                   | q. Nursing                          |
| e. Counseling/Guidance  | r. Occupational Therapy             |
| f. Criminal Justice   | s. Pastoral Counseling              |
| g. Divinity/Religion/Theology (only with a concentration in counseling) | t. Pharmacy/Pharmaceutical Sciences |
| h. Drama/Expressive Arts Therapy  | u. Psychology                       |
| i. Gerontology  | v. Public Health                    |
| j. Health Education   | w. Recreational Therapy/Counseling  |
| k. Health Sciences  | x. Social Work                      |
| l. Human Services   | y. Sociology                        |
| m. Marriage and Family Counseling                                       | z. Vocational Counseling            |

### MCAP FORMAL EDUCATION REQUIREMENT

All 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:        | b. Psychology, to include:                                  |
| • Addiction Studies/Counseling    | • Art Therapy   |
| • Marriage and Family Counseling  | • Music Therapy   |
| • Mental Health Counseling        | • Expressive Arts Therapy                                   |
| • Pastoral Counseling             | c. Social Work  |
| • Rehabilitation Counseling       | d. Advanced Nurse Practitioner (with psychiatric specialty) |
| • Recreational Therapy/Counseling |   |

### DIRECTIONS

Prior to submitting the application, you must create an account/profile at [www.flcertificationboard.org](http://www.flcertificationboard.org). The completed application must be submitted with an unofficial transcript and official course descriptions and/or syllabus for relevant coursework. There is a non-refundable fee of \$25.00, which must be submitted with the application. Applicants should review all requested information prior to preparing the request. FCB may request additional information. If sufficient information is not provided, the FCB may deny or dismiss the request. All information must be TYPED. Handwritten forms will be denied.



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### 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 Related Degree Equivalency Review packet with payment via mail to:

Florida Certification Board  
Attn: Director of Certification  
1715 South Gadsden Street  
Tallahassee FL 32301

A decision letter will be mailed to the primary address indicated in your online profile once the review has been completed.



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All information must be typed. Handwritten forms will be denied.

<b>Section 1 – Contact and Demographic Information.</b> Please be sure this information matches the primary contact information in your FCB profile.						
<b>Last Name:</b>			<b>First Name:</b>			
<b>Phone Number:</b>			<b>Email Address:</b>			
<b>Mailing Address:</b>						
<b>City:</b>		<b>State:</b>		<b>Zip Code:</b>		
<b>Section 2 – Degree Information.</b> Provide information for the degree you are seeking an equivalency review for.						
<b>Credential Sought:</b>	<b>MCAP</b>	<b>CAP</b>	<b>CPP</b>			
<b>Degree Type:</b>	<b>BA/BS</b>	<b>MA/MS/MEd</b>	<b>PhD</b>	<b>MD/DO</b>	<b>JD</b>	<b>Other</b>
<b>Degree Field:</b>						
<b>Month/Year of Graduation:</b>						
<b>School Name:</b>						
<b>School Location (City/State):</b>						
<b>Is the name on your transcript the same as on this application?</b>				<b>Yes</b>	<b>No*</b>	
<b>If “no”, what name is on your transcript?</b>						
*attach a copy of official name change documentation						
<b>Section 3 – Equivalency Review Application Checklist.</b> Identify each document included in your application.						
	<b>Unofficial Transcript</b>			<b>\$25.00 Fee</b>		
	<b>Official Course Descriptions/Syllabus</b>			<b>Other (please specify)</b>		
<b>Section 4 – Signature</b>						
<b>Signature</b>				<b>Date</b>		