



**NEVADA STATE BOARD OF EXAMINERS FOR
MARRIAGE & FAMILY THERAPISTS AND
CLINICAL PROFESSIONAL COUNSELORS**

9436 W. Lake Mead Blvd. Suite 11-J
Las Vegas, Nevada 89134-0130
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<http://marriage.nv.gov>
2nd SUP FORM

SECONDARY SUPERVISOR APPLICATION

Applicant's name (print)

License Number

Original License Date

Business Location (Organization)

email

Business Address

Agency Phone Number

Business City/State/Zip

Cell Phone Number

Pursuant to NAC 641A.182, please check all that apply

() Licensed as Marriage and Family Therapist or Clinical Professional Counselor for at least three years in this State.

() Provide a copy of Liability Insurance covering supervision.

I understand that pursuant to NAC 641A.178; I must meet with my intern for at least 40 hours during the internship.

I understand that pursuant to NAC 641A.178; unless otherwise authorized by the Board, a secondary supervisor may supervise not more than 10 interns at one time.

I agree to consult with the Board concerning the professional record, competence in practice, and emotional and mental stability or professional and ethical conduct of the intern.

The time required for Supervision includes:

- Meetings with my intern where videotapes or audiotapes are reviewed
- Therapy sessions the supervisor participates
- Therapy sessions where the supervisor observes the session from a location whereby the supervisor is neither seen nor heard
- The presentation of a case by the intern and a discussion by the supervisor of proper management and treatment of the case

The time required for Supervision does not include the time devoted to the attendance of seminars, workshops or classes.

In extenuating circumstances, the use of conference calls for supervision of an intern must be approved by the Board.

Signature

Date