



## Important Information

**Read before submitting your registration.**

- Before registering for the exam, please contact the Illinois Department of Financial & Professional Regulation to learn how to become approved to test. Before you can register with CCE, confirmation of approval from your state board is required.
- You must then register with Continental Testing Services (CTS) and pay their fee of \$98 ([www.continentaltesting.net](http://www.continentaltesting.net) or 800-359-1313). Before you can register for an examination with CCE, confirmation of CTS approval is required. CTS will notify CCE of all eligible candidates.
- Lastly, you need to submit the completed Illinois Licensure Examination Registration Form to NBCC along with the exam fee of \$195. Registrations take four weeks processing time from the time your fee clears.
- The registration processing time is four weeks from the time your payment is processed. You will be notified by e-mail once you are registered. Your exam registration is valid for six months. Please note that many states impose their own eligibility deadlines that may be less than six months.
- Once you receive your exam registration notification from CCE, you can make an appointment to take the exam during the specified testing window. Exam appointments may be scheduled one or more business days in advance. Space at testing locations is limited and available on a first-come-first-served basis.
- If you have a special accommodation request, please submit it to Continental Testing Services for approval before submitting your exam registration to CCE.
- To reschedule your exam, contact Pearson VUE at least 24 hours prior to your scheduled appointment. There is a \$50 fee to reschedule within seven days of your appointment. You cannot reschedule less than 24 hours prior to your appointment.
- After you schedule your exam, Pearson VUE will send you a confirmation e-mail listing your exam date, your exam time, the address and telephone number of the test center, and directions to the test center.
- Your scores are automatically sent to the Illinois Department of Financial & Professional Regulation approximately four weeks after the last day of the testing week. Check with the Illinois Department of Financial & Professional Regulation before requesting a score verification.

**If you are unsure of any part of the registration process, please e-mail CCE at [exam@cce-global.org](mailto:exam@cce-global.org) before submitting any registration materials or documentation.**

### TESTING QUESTIONS?

Telephone: 336-482-2856      E-mail: [exam@cce-global.org](mailto:exam@cce-global.org)      Web site: [www.nbcc.org/directory](http://www.nbcc.org/directory)

Street Address: CCE Assessment Dept., 3 Terrace Way, Greensboro, NC 27403

### ABOUT REGISTRATION

- The cost to register is \$195 for either the NCE or NCMHCE. This examination fee is **nonrefundable and nontransferable**.
- Registration is required. Please allow four weeks' processing time from the time your fee clears.
- You will be notified of the scheduling process by e-mail once you are registered. You must test before the expiration date on your eligibility letter.
- Special accommodation requests must be sent to Continental Testing Services for preapproval.

#### PLEASE INCLUDE THE FOLLOWING WITH YOUR MATERIALS:

- Your completed registration form
- Your examination fee (Please make check or money order payable to NBCC.) Use payment form below.
- A copy of your eligibility letter from the Illinois Department of Financial & Professional Regulation

#### SEND REGISTRATION MATERIALS TO:

CCE Assessment Dept.  
P.O. Box 63105  
Charlotte, NC 28263-3105  
**Or:**  
Fax: 336-482-2852

**FOR OFFICE USE  
ONLY**

REF.#1: \_\_\_\_\_

BATCH #1: \_\_\_\_\_

DATE: \_\_\_\_\_

AMOUNT: \_\_\_\_\_

**You must be approved by the Illinois Department of Financial & Professional Regulation and all of the materials listed above must be received before you will be allowed to schedule an examination date.**

1. First Name/MI: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Previous Name(s): \_\_\_\_\_
2. Street Address: \_\_\_\_\_  
City, State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_
3. Social Security Number: \_\_\_\_\_
4. Telephone: (Home) \_\_\_\_\_ (Business) \_\_\_\_\_
5. E-mail: \_\_\_\_\_
6. Gender:  Male  Female
7. Date of Birth (mm/dd/yyyy): \_\_\_\_\_
8. Ethnic Origin (optional; used for statistical purposes only):  
 African-American  Asian  Caucasian  Hispanic/Latino  Multiracial  Native American  Native Hawaiian  Other
9. Have you been approved by the Illinois Licensing Board of Professional Counselors and Marriage and Family Therapists for special examination accommodations?  Yes  No
10. Please indicate which examination you wish to take.  NCE  NCMHCE
11. Have you previously taken the NCE or the NCMHCE?  Yes  No If "Yes," indicate date(s): \_\_\_\_\_
12. Master's Degree Granting Institution: \_\_\_\_\_

*I understand that I am taking the NCE or NCMHCE as part of the Illinois state licensing requirements, and approval to take the NCE or NCMHCE or the receipt of a passing score does not demonstrate that Illinois state licensure or NBCC certification requirements have been satisfied. I authorize CCE to provide the Illinois Department of Financial & Professional Regulation with examination results. Use of the NCE or NCMHCE scores for licensure in other states cannot occur until licensure is granted in Illinois. By signing this document, I certify that the information provided in this application is accurate to the best of my knowledge. I agree to abide by all NBCC and CCE policies concerning the NCE and NCMHCE.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### PAYMENT FORM

Card Type:  VISA  MasterCard  American Express Amount: \$ \_\_\_\_\_

- Enclosed is a check or money order payable to NBCC.

Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Verification Code Numbers (from back of card): \_\_\_\_\_

- Please charge the credit card listed on the right.

Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Daytime Telephone: \_\_\_\_\_ Evening Telephone: \_\_\_\_\_



This is a supplement to the NCE/NCMHCE candidate handbook that can be downloaded from [www.nbcc.org/directory](http://www.nbcc.org/directory).

### CONTACT INFORMATION

All questions and requests for information about Illinois licensure should be directed to:

Illinois Dept. of Financial & Professional Regulation  
Division of Professional Regulation  
320 W Washington St 3rd Floor  
Springfield, IL 62786.

Telephone: 217-782-8556  
Fax: 217-782-7645  
Web site: [www.idfpr.com](http://www.idfpr.com)

All questions and requests for information about the Illinois licensure examination program should be directed to:

CCE Assessment Dept.  
3 Terrace Way  
Greensboro, NC 27403.

Telephone: 336-482-2856  
Web site: [www.nbcc.org/directory](http://www.nbcc.org/directory)

### ELIGIBILITY REQUIREMENTS

Candidates must receive approval from the Illinois Department of Financial & Professional Regulation before testing. If approved, you will receive a Licensure Examination Registration Form and eligibility letter. Also, you must register with Continental Testing Services (CTS) and receive approval for testing ([www.continentaltesting.net](http://www.continentaltesting.net); 800-359-1313). Send the completed form and the examination fee (\$195) and a copy of your eligibility letter to CCE. (Fees are subject to change.)

### REGISTRATION DEADLINES

Allow four weeks' processing time from the day your fee clears. You can submit the registration materials described above any time after being approved by the Illinois Department of Financial & Professional Regulation, but be aware that space is limited. You must take the examination during your six-month approval window. (To check the status of your registration, send an e-mail to [exam@cce-global.org](mailto:exam@cce-global.org) and include your state in the subject line.)

### TESTING SCHEDULE

Testing occurs during the first two full weeks of each month. Candidates are scheduled on a first-come-first-served basis. There are seven testing locations in Illinois; however, you are able to test at any of the more than 446 Pearson professional centers around the globe. The seven sites in Illinois are in Buffalo Grove, Chicago (Wacker Drive and Financial District), Marion, Peoria, Schaumburg and Springfield.

### EXAMINATION SCHEDULE FOR 2016

**December 7–19, 2015**  
**January 4–16**  
**February 8–20**  
**March 7–19**  
**April 4–16**  
**May 2–21**  
**June 6–25**  
**July 5–23**  
**August 8–20**  
**September 6–20**  
**October 3–15**  
**November 7–19**  
**December 5–17**

Schedule your exam date through the Pearson VUE Web site or by calling Pearson VUE's toll-free customer service line after you receive confirmation from CCE. For specific site information, go to the Pearson VUE Web site.

Pearson VUE telephone number: 866-904-4432  
Pearson VUE Web site: [www.pearsonvue.com](http://www.pearsonvue.com)

### REREGISTRATION

If you fail the exam, you must wait at least three months from your test date before you can retest. The actual retest date will depend on the monthly testing schedule and site availability. You will need to submit a new registration form and examination fee (\$195) to CCE and \$98 to Continental Testing Services ([www.continentaltesting.net](http://www.continentaltesting.net)). Contact the Illinois Department of Financial & Professional Regulation for the registration form.

### SPECIAL ACCOMMODATIONS

To request a special accommodation, contact the Continental Testing Services for approval. CCE must receive confirmation of approval from CTS before notifying Pearson VUE of the accommodation requirements. Once you receive approval, you will need to schedule your test via the toll-free number to ensure your accommodations are confirmed. Special accommodation approvals are valid for one year. After one year, you will need to submit a new request.

### AFTER PASSING THE EXAM

If you have questions about the Illinois licensure process, please contact the Illinois Department of Financial & Professional Regulation for more information.