

LINDENWOOD

LINDENWOOD UNIVERSITY ST. CHARLES, MISSOURI

Professional and School Counseling Program Application for Comprehensive Examination (CPCE)

INSTRUCTIONS:

1. Proceed to the business office and pay the \$40.00 exam fee.
2. Submit the application with the receipt from the business office to your faculty advisor by the appropriate deadline listed below.
3. Students are urged to complete all coursework before taking the exams as it considerably increases chances of passing the exam.

Name (Last, First, Middle Initial): _____

Social Security Number: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Home or Cell Phone: _____

Work Phone: _____

Number of hours completed in the program: _____

E-Mail: _____

EXAM DATES (please check the appropriate date):

Graduation:

May 2010
August 2010
December 2010

Exam Date:

___ Saturday, March 6th
___ Saturday, June 19th
___ Saturday, Oct. 9th

Deadline to Register:

January 22, 2010
May 7, 2010
August 27, 2010

This is my ___ 1st ___ 2nd time taking the CPCE.

PREREQUISITES FOR TAKING EXAM(S):

I attest that I will have completed the following courses prior to taking the exams (Please check all courses that you have completed).

___ Ethics and Professional Issues
___ Counseling Theory and Practice
___ Career & Lifestyle Development
___ Group Dynamics and Process

___ Human Growth and Development
___ Appraisal of the Individual
___ Research Methods & Program Evaluation
___ Social and Cultural Foundations

Student Signature: _____

Advisor Signature: _____