

INACTIVE STATUS REQUEST - LMFT

INACTIVE LICENSE MAINTENANCE FEE = \$50

This form, completed in full, must be returned to process your request for INACTIVE LICENSE STATUS.

Licensees on inactive status shall not practice marriage and family therapy or perform any other prohibited activities. The Board shall consider requests for a return to active status on an individual basis upon written request from the licensee. Contact the Board (ncmftlb@nc.rr.com) if or when you wish to reactivate your license.

(Print or Type)

Name:

License Number (REQUIRED):

	ADDRESS (REQUIRED)	
Address		
City State, Zip		
Phone		
Email <i>(not published – for board use only)</i>		

My signature affirms that I understand licensees on inactive status cannot practice marriage and family therapy or perform any other prohibited activities that I must request inactive status and pay required maintenance on an annual basis - by July 1 of each subsequent year from date inactive status was granted.

Signature (REQUIRED)

Date

Board Office Use Only. Do not write in this section.

Check Number , Money Order Number, Paypal

Postmarked Date

Fee Paid: \$50

RETURN FORM AND FEE TO:

NC MFT Licensure Board

201 Kildaire Farm Road, Suite 200, Cary, NC 27511

E-Mail: ncmftlb@nc.rr.com or Fax: (919) 336-5156