

How To Apply for a Social Worker License

This guide will assist you in applying online for the following licenses:

- Initial Licensed Baccalaureate Social Worker (LBSW) or Licensed Master Social Worker (LMSW)
- LBSW, LMSW, or LCSW applicants coming from another state

The online licensing system link is found here:

<https://vo.licensing.hpc.texas.gov/datamart/login.do>

A guide on how to create a new account is available here:

<https://bhec.texas.gov/how-to-user-guides/>

⚠ IMPORTANT: Before you begin, make sure your required documentation is saved on your device. You will be prompted to upload this toward the end of the application process.

Step-by-Step Instructions

1. Log into your **online licensing system account**.

If you do not yet have an account, follow the instructions linked above to create one.

Welcome to the Online Licensing System | [FAQ](#) | [Public Search](#) | [Contact Us](#)

Returning User
* * are required.
*User ID:
*Password:
[Forgot password?](#)
[Forgot user ID?](#)

New User
[Begin Here For Sign-up](#)
New Users (those who have not applied or renewed online since June 2011) must create an online account to use the Online Licensing System. Opening a second account will not delete the first account.

Public Search
It is not necessary to register or login to view or search for a license or registration. To search by name, license number, license type, city, or county click on the "Public Search" link above.

Sign-up and manage your licenses
Apply for New License: To apply for an initial license, please sign up using the link to the left. If you have previously registered using this system, it is not necessary to create another user registration to apply for a new license.
Renew or Maintain Your License: To renew and/or maintain an existing license, please login with your existing user ID and password, or click on the link to the left to register as a new user.
Maintenance Window: Click [here](#) to see our upcoming maintenance schedule

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2. From the first dropdown, select:

→ **Texas Behavioral Health Executive Council**,

then choose the **board that issues the license** you're applying for and click "Select".

■ Start a New Application

What are you applying for?

Texas Behavioral Health Executive Council ▼

Licensed Social Worker Online Initial ▼ **Select** 

3. Read the introduction, then click "Next".

Licensed Social Worker Online Initial - Introduction

Welcome to the online application process for the Texas State Board of Social Worker Examiners (board). Please note: Your information *will not be saved* until you complete the application and *submit* your information and fees. From the time *all* of your application materials and fees are received by the board, you can expect a minimum of four weeks processing time, *if* there are no problems or deficiencies.

This online application process can be used to obtain a Texas social worker license ONLY by individuals who:

1. Have completed the ASWB exam process and passed the exam required for the level of licensure requested, or
2. Hold an active social worker license in another state and wish to become licensed in Texas

If you are already licensed as an LBSW, LMSW, or LCSW in the State of Texas, and you need to: apply for specialty recognition (such as LBSW-Independent Practice Recognition status, or LMSW-Independent Practice Recognition status), renew your license, change the status of your license or apply to be a board-approved supervisor, you must complete those transactions separately from completion of this online application process. Please see the board's website at www.bhec.texas.gov for requirements.

Press "Next" to continue.

Press "Cancel" to cancel this application and return to the main menu.



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4. Answer the **function questions** and click “Next”.

These determine whether you are completing the correct application.

Licensed Social Worker Online Initial - Function Suitability

Answer the following questions below to ensure that you have selected the correct online transaction.

Answer the questions and press "Next".

Press "Previous" to return to the previous section.

Press "Cancel" to cancel this application and return to the main menu.

Question	Answer
Are you attempting to renew an existing license/registration/permit?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Are you currently licensed as an LBSW, LMSW, or LCSW in the State of Texas?	<input type="radio"/> Yes <input type="radio"/> No
Do you need to submit a revised Supervisory Agreement Form?	<input type="radio"/> Yes <input type="radio"/> No
Are you applying for board-approved supervisor status?	<input type="radio"/> Yes <input type="radio"/> No
Are you trying to convert your license to/from inactive status?	<input type="radio"/> Yes <input type="radio"/> No
Are you trying to reinstate a license which is currently suspended based on a default on student loans, or failure to comply with child support or child custody orders or agreements?	<input type="radio"/> Yes <input type="radio"/> No
Are you trying to submit additional information related to an existing application for licensure?	<input type="radio"/> Yes <input type="radio"/> No
Are you trying to submit a criminal history evaluation request?	<input type="radio"/> Yes <input type="radio"/> No
Are you trying to submit information to the board related to: change of name, address, contact information, or employment; an arrest, deferred adjudication, or criminal conviction other than for a Class C misdemeanor traffic offense (a DWI is not considered a traffic offense); the filing of a criminal case; a settlement or judgment in a civil lawsuit related to your social worker practice; or complaints, investigations, or actions against you by a government agency or licensing or certification body?	<input type="radio"/> Yes <input type="radio"/> No
Are you attempting to upgrade a current Texas license?	<input type="radio"/> Yes <input type="radio"/> No
Have you been awarded the social work degree required for this license? PLEASE NOTE: An incorrect answer on this question will result in forfeiture of your application fee.	<input type="radio"/> Yes <input type="radio"/> No
Have you passed the ASWB exam that is required for this license?	<input type="radio"/> Yes <input type="radio"/> No
Are you applying for a license that is currently expired? If so, you will need to apply for reinstatement of the license. The reinstatement application is available on the appropriate Board page of the BHEC website.	<input type="radio"/> Yes <input type="radio"/> No

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⚠ An answer indicating a different license type will trigger an error message.



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5. Enter or update your **personal details**, then click “Next”.

Licensed Social Worker Online Initial - Name and Personal Details

I understand that at any one point in time, I have only one legally-recognized name and that any license issued by the State of Texas shall only be issued under a legally-recognized name. I understand that I will be required to submit a copy of my driver's license as part of the licensure process related to the licensing examination, and that the name under which I apply for licensure MUST match my driver's license for this purpose. I understand that disclosure of a social security number by an applicant is mandatory under the Family Code, Section 231.302 and the Health Insurance Portability and Accountability Act (HIPAA) of 1996, Section 221. Social Security Numbers are confidential and will be used for identification and reporting purposes as required by law.

Enter your personal details and press "Next" to continue.

Press "Previous" to return to the previous section.

Press "Cancel" to cancel this application and return to the main menu.

Title: _____

First Name: _____

Second Name: _____

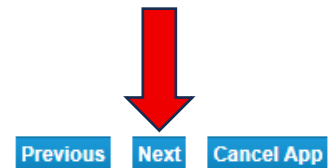
Last Name: _____

Suffix: _____

* Social Security Number: (No Dashes)

* Confirm Social Security Number: (No Dashes)

* Date of Birth: (mm/dd/yyyy)



How to Apply for a Social Worker License

6. Enter your **contact information**, then click “Next”.

Licensed Social Worker Online Initial - Contact Information

Please review the address information below and make any necessary changes/corrections.

Your Main Address will continue to be your address of record with the Board, and we will send all correspondence, including reminder renewal postcards and renewal permits, to that address.

Your Main Address will be displayed in full unless you have designated it as your home address below in the online licensing system.

If you would like to display a Business Address to the public, please use the "Add Another Contact" section and select the Business Address (optional) to enter that address. The Business Address will be displayed in full in public search.

Press "Continue" to go to next page.

Press "Previous" if you do not want to save your changes.

Press "Delete" to delete this address.

If Copy Button is available. Press "Copy" to copy a previously entered address.

Press "Lookup" after entering the zip code to populate the U.S. city, state and county.

Select an address type and press "Add" to add a new address.

☐ Main Address

* Is this your Home Address? Yes No

Street Number:

* Address:

* Zip Code:

* City:

* State:

* County:

* Country:

* Phone Number: (999) 999-9999

Extension:

* E-mail:

Contact #:

Web Address:

Add Another Contact

Contact Type:



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7. Select your **license type** and **military status** (if applicable), then click “Next”.

Licensed Social Worker Online Initial - Select Attributes

Please read the qualifications for the various social work licenses set out in 22 [TAC 781.401](#) and then select the type of license for which you want to apply. NOTE: Application fees are non-refundable and non-transferable so if you apply for the LMSW but subsequently realize you qualify for the LCSW, the Council will not issue a refund or transfer your application fee to an LCSW application.

Prior to claiming any Military Status, please review [Council rule 882.60](#) and the corresponding [Board rule](#) (i.e., LMFT 801.204, LPC 681.114, Psychology 463.20, Soc. Work 781.419) to determine if you meet the Council's military licensing standards. If you believe that you do, please upload supporting documentation (e.g., proof of military service or marriage to a military service member, proof of substantial equivalency) on the Attachments page of this application.

Listed below are the license attribute(s) you may add.

Please select the desired attribute(s) and press "Next" to continue.

Press "Previous" to return to the previous section.

Press "Cancel App" to cancel this application and return to the main menu.

Attribute Type:	How Licensed															
* Attributes:	<table border="1"><thead><tr><th>Exists On License</th><th>Request To Add</th></tr></thead><tbody><tr><td><input type="checkbox"/></td><td><input type="radio"/></td><td>Lic Baccalaureate Social Worker Online</td></tr><tr><td><input type="checkbox"/></td><td><input type="radio"/></td><td>Licensed Clinical Social Worker Online</td></tr><tr><td><input type="checkbox"/></td><td><input type="radio"/></td><td>Licensed Master Social Worker Online</td></tr></tbody></table>	Exists On License	Request To Add	<input type="checkbox"/>	<input type="radio"/>	Lic Baccalaureate Social Worker Online	<input type="checkbox"/>	<input type="radio"/>	Licensed Clinical Social Worker Online	<input type="checkbox"/>	<input type="radio"/>	Licensed Master Social Worker Online				
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Attributes:	<table border="1"><thead><tr><th>Exists On License</th><th>Request To Add</th></tr></thead><tbody><tr><td><input type="checkbox"/></td><td><input type="radio"/></td><td>Military Service Member</td></tr><tr><td><input type="checkbox"/></td><td><input type="radio"/></td><td>Military Spouse holds a current license issued by another jurisdiction</td></tr><tr><td><input type="checkbox"/></td><td><input type="radio"/></td><td>Military Veteran</td></tr><tr><td></td><td><input checked="" type="radio"/></td><td>None of the Above</td></tr></tbody></table>	Exists On License	Request To Add	<input type="checkbox"/>	<input type="radio"/>	Military Service Member	<input type="checkbox"/>	<input type="radio"/>	Military Spouse holds a current license issued by another jurisdiction	<input type="checkbox"/>	<input type="radio"/>	Military Veteran		<input checked="" type="radio"/>	None of the Above	
Exists On License	Request To Add															
<input type="checkbox"/>	<input type="radio"/>	Military Service Member														
<input type="checkbox"/>	<input type="radio"/>	Military Spouse holds a current license issued by another jurisdiction														
<input type="checkbox"/>	<input type="radio"/>	Military Veteran														
	<input checked="" type="radio"/>	None of the Above														
Attribute Type:	Citizen Status															
* Attributes:	<table border="1"><thead><tr><th>Exists On License</th><th>Request To Add</th></tr></thead><tbody><tr><td><input type="checkbox"/></td><td><input type="radio"/></td><td>Non-US Citizen</td></tr><tr><td><input type="checkbox"/></td><td><input type="radio"/></td><td>US Citizen</td></tr></tbody></table>	Exists On License	Request To Add	<input type="checkbox"/>	<input type="radio"/>	Non-US Citizen	<input type="checkbox"/>	<input type="radio"/>	US Citizen							
Exists On License	Request To Add															
<input type="checkbox"/>	<input type="radio"/>	Non-US Citizen														
<input type="checkbox"/>	<input type="radio"/>	US Citizen														

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8. Answer questions about:

- Any **complaint history**, and
 - Any **criminal conviction history** (if applicable).
- Then click “Next”.

Licensed Social Worker Online Initial - Information

Please provide responses to the following questions. The questions that are marked with an asterisk must be answered to continue with this application.

Criminal History and Complaint History

Applicants must provide all information relating to: criminal history; professional license or certification complaint history; governmental agency complaint history; and civil liability suit history related to professional practice. Failure to report any of these circumstances may result in such actions as: denial of your license, disclosure of such information to other licensing boards or other entities, initiation of legal action against you, or other actions as appropriate.

If you answer YES to any of the following questions, you must attach a detailed explanatory statement, as well as a copy of all relevant legal or other documentation. Additional information may be requested by the board.

1. Have you ever been found in violation of laws or rules pertaining to professional practice or settled such charges prior to a formal finding in an administrative proceeding?
 Yes No
 2. Have you ever had a judgment against you or settled prior to such a finding in a civil proceeding related to professional practice?
 Yes No
 3. Are charges pending against you for any of the above?
 Yes No
 4. Have you ever used another name?
 Yes No
- If yes, please list name(s) in the box below.
-
5. Are you a U.S. Citizen?
 Yes No

ALL applicants will be required to provide documentation on the File Attachments page.

US Citizens - proof of US Citizenship (see File Attachments page for list of accepted documents)

Non-US Citizens - your Systematic Alien Verification for Entitlements (SAVE) form and your current immigration status document (listed on SAVE form)

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9. Enter your **education details**, then click “Next”.

Licensed Social Worker Online Initial - Information

Please provide responses to the following questions. The questions that are marked with an asterisk must be answered to continue with this application.

Add Education History [Add](#)

Education History

Please provide the required information concerning your education, which must be verified by submission to the board of official college transcript(s). In order to meet minimum requirements for licensure as a social worker in Texas, your social work program must have been accredited by or in candidacy for accreditation by the Council on Social Work Education (CSWE) throughout the course of your education.

Social work degrees earned from educational institutions outside of the United States and its territories must be recognized by CSWE as equivalent to a CSWE accredited program in the United States. If your educational institution is not accredited by CSWE, you must acquire written documentation from CSWE confirming that it recognizes your educational program as equivalent to a CSWE accredited program, and this documentation must accompany your application materials.

If the education history information provided contains blank fields, errors, or deficiencies, it will be necessary to submit additional information by mail.

- * Name of instructional institution, Location, Dates attended From (mo/dd/yr) and To (mo/dd/yr), Type of Degree obtained and Major (if applicable), Name on Transcript
- * Date of Graduation
- * ASWB Exam Taken
- * Date Exam Passed

(mm/dd/yyyy)

 (mm/dd/yyyy)

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10. Enter your **prior license information**, if any, then click “**Next**”.

Licensed Social Worker Online Initial - Information

Please provide responses to the following questions. The questions that are marked with an asterisk must be answered to continue with this application.

Other Licenses

List all professional licenses or certifications which you currently hold or have previously held in any field of practice. Include the Title of the Professional License/Certification held, the Expiration date, the State of Jurisdiction of Issuance, the Name of the Issuing Board or Entity, the License Number, and the Issue Date.

If you answered "yes" to any of these questions, please provide details in the text boxes below. More information may be required.

* Have you held any professional licenses or certifications within the last 10 years?

Yes No

* Have you had a professional license or certification denied, cancelled, probated, suspended, or revoked?

Yes No

Please provide details, including license number, license type, state of issue, etc.:

List any relevant professional licenses or certifications that you have held within the last 10 years; include Professional License Held/Expiration Date, Issuing Board/State, License Number, and Issue Date.

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11. Choose your **method of licensure**:

- If you answer “**No**” to the first question, you are applying for your **first-ever social work license**.
- If you answer “**Yes**”, you are applying based on a license held in **another state**. Then click “**Next**”.

Licensed Social Worker Online Initial - Information

Please provide responses to the following questions. The questions that are marked with an asterisk must be answered to continue with this application.

Endorsement

An applicant, who is currently licensed and in good standing with another jurisdiction's social work licensing board (or other regulatory entity which is recognized by the Texas State Board of Social Worker Examiners), *may* be eligible to demonstrate completion of some minimum requirements for Texas licensure by endorsement. Endorsement is the process whereby the board reviews requirements for licensure completed for or while under the jurisdiction of another board-approved regulatory entity. Minimum requirements for licensure, including those for supervised experience and supervision, in the jurisdiction of current licensure must have been substantially equivalent, as determined by the Texas State Board of Social Worker Examiners, to the current minimum requirements in Texas in order to be recognized through endorsement.

* I request that the board consider documentation towards minimum requirements for licensing by Endorsement.

Yes No

If "yes" all applicants are required to provide license verification from their previous state/jurisdiction.

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12. Upload all **required documents** (e.g., jurisprudence exam certificate):

- Click “**Choose File**”
- Select your file
- Add a description
- Click “**Attach**”

Licensed Social Worker Online Initial - Attachments

Please attach your application form and any required documentation for the license you are applying for in accordance with the instructions on the application checklist. A list of the required documentation and their submission methods can be found on the application checklist included in the application packet. Failure to do so will result in a delay in processing your application. Only pdf and Word files may be uploaded.

1. Locate a file using the "Choose File" button.
2. In the "Notes" field, please enter the description of the file you are uploading.
3. Press "Attach" after entering each description.

You will see all files entered under the Files Uploaded table. You may "View" or "Remove" documents you added if necessary.

Note: There is a 120 character max file name limit, 5MB per file and a 20MB in total attachment limit.

Locate a file with the "Browse" button and press "Attach" or "Remove" as is required.


Press "Next" when there are no more files to attach.

Press "Previous" to return to the previous screen.

Press "Cancel" to cancel this application and return to the main menu.

File Name:

Notes:

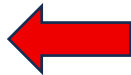


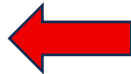
⚠ You may upload multiple files. The total size limit is **20MB**. Make sure each file is clearly labeled.


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13. Review all entries for accuracy. Click “Submit” to proceed.

	ASWB Exam Taken	test
	Date Exam Passed (mm/dd/yyyy)	03/08/2024

Other Licenses		Edit 
	Have you held any professional licenses or certifications within the last 10 years?	No
	Have you had a professional license or certification denied, cancelled, probated, suspended, or revoked?	No
	Please provide details, including license number, license type, state of issue, etc.:	
	List any relevant professional licenses or certifications that you have held within the last 10 years; include Professional License Held/Expiration Date, Issuing Board/State, License Number, and Issue Date.	

Endorsement		Edit 
	I request that the board consider documentation towards minimum requirements for licensing by Endorsement.	Yes

Previous	Submit 	Cancel App
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14. Agree to the **affirmation statement** by selecting “Yes”, then click “Next”.

! IMPORTANT: On the 7th bullet, “One year” has been changed to “180 days” !

Licensed Social Worker Online Initial - Attestation

Press "Previous" to return to the previous section.

Press "Submit" to continue.

Press "Cancel" to cancel this application and return to the main menu.

The undersigned hereby acknowledge, attest, or affirm the following:

- The responses and information contained in this document are true and correct and that any misrepresentation may constitute a criminal violation under Section 37.10 of the Penal Code or a violation of Title 22, Part 41, Chapter 882, Subchapter C, §882.34 of the Texas Administrative Code.
- I have read, understand, and agree to abide by the laws governing the practice of my profession, including the applicable rules set out in Title 22, Parts 21, 30, 34, 35 and 41 in the Texas Administrative Code and understand my duty to stay abreast of and comply with any future changes to these laws. Moreover, the Texas Behavioral Health Executive Council, together with its member boards, appointed members, agents, employees, and contractors, is not obligated to notify me individually or directly of any such future changes to these laws.
- Neither the Council nor its member boards, appointed members, agents, employees, and contractors can modify, waive, or excuse a qualification for licensure unless expressly authorized to do so by statute or rule.
- I have a duty to comply with Title 22, Part 41, Chapter 882, Subchapter C, §882.32 of the Texas Administrative Code by keeping my address and telephone number on file with the agency current while my application is being processed.
- Pursuant to Section 232.0135 of the Family code, this application or a future renewal may be denied for failure to pay child support;
- Application and examination fees submitted in connection with this application are non-refundable and non-transferrable.
- I have one year following receipt of this application by the Council to ensure that all required or requested documentation and information has been submitted. The failure to submit all required or requested documentation and information may delay the processing of my application or result in my application going void or being denied.
- I understand that applications are reviewed in the order in which they are received and that it may take agency staff up to six weeks to process my application. I agree not to inquire about the status of my application or contact agency staff within this six-week period unless I am responding to an inquiry from staff. **In the event an applicant has not heard from the agency after six weeks of submitting his or her application, the applicant may contact agency staff, preferably via email, to check on the status of the application. Telephone calls and emails requesting a status update within the initial six-week review period only serve to increase application processing times for all applicants.**
- I agree to hold the Texas Behavioral Health Executive Council, as well as its member boards, appointed members, agents, employees, and contractors free from any and all actual or potential claims, suits, demands, causes of action, charges, or grievances of any kind or character related to or arising out of (in any way, whether directly or indirectly) this application or materials submitted in support thereof. Furthermore, I expressly authorize the Council to seek and obtain any information or references it deems fit in verifying my credentials and qualifications for licensure.

- Yes
 No

[Previous](#) [Submit](#) [Cancel](#)



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15. Click “View PDF Summary Report” to download and save a copy of your application. Then click “Pay Now” to proceed to the payment processor.

Fee and Summary Report

Your application data has been submitted. Click on "View PDF Summary Report" and print this report for your records.

Deficiencies that are currently associated with your online application may be listed below.

You are required to pay the amount below for your application to be processed.

Press "Pay Now" to proceed to the fee payment page.

Fees

Total Amount Due: \$120.00

Deficiencies

1. Insufficient money received

[Fix](#) [Pay Now](#) [View PDF Summary Report](#)



Online Application Payment

Select the applications you wish to pay for and press "Next" to continue

Press "Main Menu" to return to the main menu

Application Number	Description	License Number	License Type	Applicant Name	Fee
[Redacted]	Duplicate Permit	[Redacted]	BHEC - Professional Counselor	[Redacted]	\$10.00 <input type="checkbox"/>
[Redacted]	Duplicate Permit	[Redacted]	BHEC - Professional Counselor	[Redacted]	\$10.00 <input type="checkbox"/>
[Redacted]	Duplicate Wall Certificate	[Redacted]	BHEC - Professional Counselor	[Redacted]	\$10.00 <input type="checkbox"/>
[Redacted]	Add Doctoral Degree	[Redacted]	BHEC - Professional Counselor	[Redacted]	\$54.00 <input type="checkbox"/>
[Redacted]	Licensed Social Worker Online Initial	[Redacted]	BHEC - Social Worker	[Redacted]	\$120.00 <input checked="" type="checkbox"/>

Payment Method Credit Card

[Next](#) [Main Menu](#)

Confirm Payment Details

Select payment method and press "Next" to pay for these applications.

Press "Cancel" if you do not wish to continue with the payment.

Application Number	Description	License Number	License Type	Applicant Name	Fee
451532	Licensed Social Worker Online Initial	[Redacted]	BHEC - Social Worker	AMES, LAURE R	\$120.00
Total					\$120.00

Payment Method: Credit Card

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Texas Behavioral Health Executive Council



Card Information

Card Number*  Expiration Date* CVV* 



Billing Address

First Name* Last Name*
Address Line 1* Address Line 2
City* State*
Zip* Country*
Phone Email

* Required fields

Licensed Social Worker Online Initial	\$ 120.00
Total	\$ 120.00

**Payment includes Texas.gov cost recovery fees for the state of Texas.

 I am human 



⚠ If you do not pay within 30 days, the application will be automatically deleted.

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After Submission

Once your payment is processed:

- You will receive an **email confirmation** from the licensing system.
- This email will contain **instructions for completing the required fingerprinting**.

Online Application Payment Success

Press "Main Menu" to return to the main menu.

Press "View PDF Summary" and print this page for your records using the print function of your browser.

Amount Paid:	\$120.00
Authorization Number:	2000658532
Trace Number:	510BH491546ID8

Application Number	Description	Applicant Name	Fee
5272-451532	Licensed Social Worker Online Initial	AMES, LAURE R.	\$120.00

[Next](#)

[View PDF Summary Report](#)

