

Wisconsin Department of Safety and Professional Services

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Madison, WI 53703

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DIVISION OF PROFESSIONAL CREDENTIAL PROCESSING

INFORMATION FOR MUSIC, ART OR DANCE THERAPIST REGISTRATION

An applicant is eligible for a music, art or dance therapist registration if the applicant provides satisfactory evidence of certification, registration or accreditation as a music, art or dance therapist, does not have an arrest or conviction record, subject to secs. 111.321, 111.322 and 111.335 Stats., and pays the fee required under sec. 440.05(1), Stats.

REGISTRATION REQUIREMENTS:

To obtain a registration as a music, art or dance therapist an individual must submit all of the following:

1. An application on a form provided by the department;
2. Social Security Number form;
3. The appropriate fee; and
4. Evidence satisfactory to the department that he or she is certified, registered or accredited as a music, art or dance therapist, as appropriate, by one of the following organizations:

Music Therapists - The Certification Board for Music Therapists, National Music Therapy Registry, American Music Therapy Association or another national organization that certifies, registers or accredits music therapists.

Art Therapists - The Art Therapy Credentials Board or another national organization that certifies, registers, or accredits art therapists.

Dance Therapists - The American Dance Therapy Association or another national organization that certifies, registers or accredits dance therapists.

5. Convictions and Pending Charges (Form #2252), if applicable.

OPTIONAL LICENSE TO PRACTICE PSYCHOTHERAPY:

A person registered as a Music, Art, or Dance Therapist may be granted a license to practice psychotherapy by meeting certain additional qualifications established under rules RL 140 through RL 142 of Wisconsin Administrative Code.

To apply for registration with a license to practice psychotherapy, complete this registration application and the application for license to practice psychotherapy, Form #2575.

INSTRUCTIONS FOR COMPLETING THE REGISTRATION APPLICATION:

1. **Application (Form #2427):** Complete the enclosed application and attach the appropriate fee. Make check payable to "Department of Safety & Professional Services." Mail to the address below.
2. **Social Security Number Form.** Complete page 4 of 4 (Form #2427) and enclose with your application.
3. **Request for Verification of Certification, Registration or Accreditation (Form #2426):** Complete and forward to the organization where you are certified, registered or accredited.
4. **Convictions and Pending Charges (Form #2252):** attach with required fee in amount of \$6.00 (if applicable).

MAILING INSTRUCTIONS: Mail the application and the appropriate fee to the following address:

DEPARTMENT OF SAFETY & PROFESSIONAL SERVICES
BUREAU OF HEALTH SERVICE PROFESSIONS
PO BOX 8935
MADISON WI 53708-8935

#2425 (Rev. 8/11)
Ch. 440, Stats.