

Step 1: Log in to MyATCB. Before you do please review the reinstatement requirements outlined here: <https://www.atcb.org/reinstating-credentials/>

Step 2: Click on credential. This will bring you into your credential portal.

You are currently authenticated via the Licensure Management System.

MYATCB

Home Applications Request Verification My Profile

LeeAnn Mandrillo Logout

Primary Address 



My Certifications, Credentials, Examinations



Registered Art Therapist
Registered Art Therapist #: **20-443**
Expiration: **07/01/2021**

Inactive

Click on a certificate/certification panel above to bring up application history, files, and certificate/certification options.

Step 3. Click on Reinstatement

CREREDENTIALS BOARD, INC. **ATCB**

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Registered Art Therapist Details

Registered Art Therapist #: 20-443
Expiration: 07/01/2021
Status: Inactive

Registered Art Therapist Options

[Reinstatement](#)

Application History

| | | |
|--|--|--------------------------|
| | MAND-VNDCV3 Type: Renewal | Complete |
| | MAND-KNMY6C Type: Initial | Complete |

Step 4: Begin application.

- If you have received a waived fee approval from the ATCB Board of Directors, and see the fee at the end of the application. Do not continue-contact LeeAnn Mandrillo leeann@atcb.org
- Reinstatements require review before approval
- Endorsers must be an ATCB credential holder in good standing.
- Each step of the application must be completed

You are currently authenticated via the Licensure Management System.

ART THERAPY CREDENTIALS BOARD, INC. ATCB MYATCB

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Registered Art Therapist Reinstatement

Application Steps

- Application Start
- Address Changes
- Disciplinary and Litigation History
- Endorser
- Verification
- Payment
- Confirmation

Application Start

This reinstatement application is for individuals whose Art Therapy Credential Board credentials are currently inactive.

For this application, you will need to provide the name and email for:

- A current ATCB credential holder endorsing your return to active status. The endorser will need to submit a letter to applications@atcb.org

Completion of the reinstatement fee is \$400 and is nonrefundable and nontransferable.

Submission of an application and the fee does not guarantee reinstatement will be granted.

Exit Save / Next

Step 5: Address Changes-please ensure your contact information is up to date

Step 6: Complete Ethics Attestation: If you have answered yes to any of the questions above, please provide any/all documents and other information related to the affirmative response. Providing any and all such information will help expedite your application or renewal. If you do not present any and all such information, your application or renewal will likely be delayed and it is likely that the information will be requested by an ATCB ethics officer before your application or renewal can be properly considered and/or processed.

| |
|---------------------------------------|
| Address Changes ✓ |
| Disciplinary and Litigation History ⬇ |
| Endorser |
| Verification |
| Payment |
| Confirmation |

Disciplinary and Litigation History

Please answer the following questions. For any YES answers, additional information is required.

* Since the date of your application for ATCB credentials, if this is your first renewal or the date of your latest renewal of ATCB credentials, has an indictment, charge, or complaint (not including traffic offenses) with any court, regulatory authority, professional association, credentialing body, or any governmental or private payer of benefits been filed or entered against you?

Yes No

* Since the date of your application for ATCB credentials, if this is your first renewal or the date of your latest renewal of ATCB credentials, has litigation involving allegations of professional negligence or misconduct been filed or entered against you?

Yes No

* With respect to the matters listed in 1) and 2) above: has a judgment, order of dismissal or deferred adjudication, conviction, plea of guilty, plea of nolo contendere, or disciplinary sanction been filed or entered against you?

Yes No

* Since the date of your application for ATCB credentials, if this is your first renewal, or the date of your latest renewal of ATCB credentials, have you voluntarily surrendered an active professional license pending the outcome of an investigation or hearing?

Yes No

* Since the date of your application for ATCB credentials, if this is your first renewal, or the date of your latest renewal of ATCB credentials, have you pled guilty or nolo contendere (no contest) to, or have you ever been convicted of, a criminal

Step 7: Endorser-add name and email address. If you need to use someone other than an active ATCB credential holder to serve as your endorsement please contact LeeAnn Mandrillo leeann@atcb.org as this requires board approval. You can also upload the letter of endorsement if you have it.

ATCB LeeAnn - Outl... (1) Facebook User Home Page /... ATCB Info - Outlook RapidIdentity Admin.'s Classroom... Facebook Marketpl... Inbox - lwmandrillo... Management System [LB: ICE] Reading list

ART THERAPY ATCB
CREDENTIALS BOARD, INC.

Home Applications Request Verification ATCB Communications My Profile

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Application Start ✓
Address Changes ✓
Disciplinary and Litigation History ✓
Endorser +
Verification
Payment
Confirmation

Registered Art Therapist (Provisional) Reinstatement

Endorser

Please provide the information for your endorser, to submit a letter of endorsement by clicking the "Add" button.

Endorser
None Reported + Add

Uploaded Files:
Drag files anywhere on the page or click [here](#) to upload supporting documentation.

Previous Exit Save / Next

ATCBE Score Repo....pdf IMG_2528.heic IMG_2527.heic image.png IMG_3720.jpg IMG_3721.jpg Show all x

Use this feature if you have your letter of endorsement.

Step 8: Application Attestation-signature must match what is associated with your account (that name is in the top right corner of your portal)

ATCB are all the exclusive property of the ATCB. I agree to abide by the ATCB's instructions regarding the use of its intellectual property and to not use this intellectual property in any way without the express prior written consent of the ATCB. I agree to correct, at my own expense, any inaccurate or unauthorized use by me of the ATCB's intellectual property. I agree that if I refuse to make corrections, then the ATCB is entitled to obtain all relief permitted by law.

I agree to cooperate promptly and fully in any review of any credentialing by the ATCB, including submitting such documents and information as it may be required in the sole discretion of the ATCB to confirm the information in this application. I authorize the ATCB and ATCB's designated parties to communicate any and all information relating to my ATCB application and review thereof.

I agree to report to the ATCB within 60 days of my receipt of notification, the following matters related to me:

- Any change in name, mailing address, telephone number, and email address;
- Any other facts bearing on eligibility for credentials, including but not limited to: filing of an indictment, charge or complaint, not including traffic offenses, with any court, regulatory authority, professional association, credentialing body, or governmental or private payer of benefits; any litigation involving allegations of professional negligence or misconduct and the final disposition of such charges, complaints, or cases including but not limited to, entry of a judgment, order of dismissal or deferred adjudication, conviction, a plea of guilty, a plea of nolo contendere, and imposition of disciplinary sanctions.

Upon provisional registration, I understand that credentialing data is considered public information, and I authorize the ATCB to release such information and my name and city/state in its listing of registered art therapists unless I indicate otherwise to the National Office.

I understand that application fee's are nonrefundable and nontransferable.

By signing, I acknowledge that I have read and understood this information, and agreed to abide by these terms.

***Signature: (Type full name)**

Signature

Signature Date: 03/07/2022

Step 9: Payment-if you have a fee waiver from the board once you sign the application will skip payment, process and you will receive email notification. If you have waiver and see the payment requirement, please contact leann mandrillo leann@atcb.org