



**MID-SOUTH SUBSTANCE ABUSE COMMISSION**  
**Verification of Clinical Staff Credentials**

**Program Name:** \_\_\_\_\_

It is the policy of Mid-South Substance Abuse Commission that all contracted Providers meet the standards for practice and satisfy the requirements of the Credentialing Process established by Mid-South. **All** professional staff and other health services providers **must be** qualified to perform services consistent with Mid-South's Staff Qualification Policy and federal, state and local community standards. This form is for the Provider to verify and attest that **all licensed and/or certified professional staff and other health services staff** who **deliver direct services** to Mid-South Community Grant and Medicaid funded clients, are in good standing with the appropriate licensing and/or certifying board and/or agency. Additionally, **all relevant** legal background checks and verification of educational credentials have been performed.

Please submit along with this **signed** form and **copies** of current licenses and/or certifications for all professional and other health services staff, as appropriate.

- **I verify and attest** that all professional staff and other health services staff who deliver direct services to Mid-South funded clients are current and in good-standing with their respective licensing and/or certifying board or agency. Copies of licenses and/or certifications are located in their personnel files and are available for Mid-South review.
- **I verify and attest** that those employees who do not yet have their license and/or certification, have a plan and are working to obtain the appropriate license and/or certification. The plan is located in their personnel files and are available for Mid-South review.
- **I verify and attest** relevant legal background checks were made as well as educational credentials for **all** professional staff and other health services staff who deliver direct services to Mid-South funded clients. Copies of educational credentials and the results of the legal background checks are located in their personnel files and are available for Mid-South review.
- **I attest** to the correctness and completeness of all professional staff and other health services staff verification of information in conformance of our Personnel Policies and Procedures.

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Name and Title of Authorized Signer

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Signature

Date