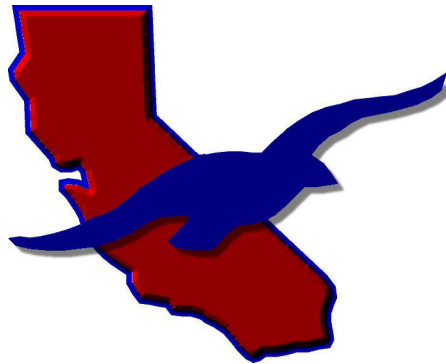


Alcohol and Drug Counselor (ADC)

MANUAL/PORTFOLIO

(For individuals not currently certified by CCBADC in the career path: CADCA CADC I, CADC II.)



SYSTEM FOR CERTIFICATION IN THE STATE OF CALIFORNIA

*Revised January, 1988
Revised April, 1988
Revised November, 1989
Revised July, 1990
Revised April, 1991
Revised January, 1992*

*Revised May, 1992
Revised January, 1993
Revised January, 1994
Revised January, 1995
Revised March, 1996
Revised March, 2001*

*Revised September, 2001
Revised June, 2003
Revised June 2006
Revised, March, 2008
Revised, November, 2010
Revised, January, 2011
Revised May, 2012
Revised March, 2013*

Purpose of the Certification Manual: *This document is the application document (manual) for certification as an alcohol and drug counselor. This document is not intended to be used alone; all applicants and other interested individuals must review the information contained within the ADC Certification Handbook in order to fully understand all areas of the certification process including but not limited to, examination information, domains, policies/procedures, appeals, special accommodations, etc. The ADC Handbook can be found at www.caadac.org/forms.*

CCBADC Mission Statement:

Our mission is to unify addiction professionals in achieving excellence in treating alcohol and other drug problems through the attainment of the highest levels of competency, ethics and advocacy.

CCBADC Purpose: The premise of certification is to reinforce the ideology that those with substance use disorders and addiction can be rehabilitated through effective intervention by both degreed and non-degreed professionals who meet the standards developed and adopted by the CCBADC. The other eight major purposes of the certification system formulated by the Certification Board are as follows:

1. Establish credibility, confidence and trust
2. Clarify and define counselor duties and responsibilities
3. Develop professional identity
4. Enhance incentive for counselor professional growth
5. Reduce alcohol/drug stigma
6. Provide professional assistance to clients
7. Increase potential of certification reciprocity
8. Increase reimbursement potential

Principles of Certification:

1. Certification is based on competence and knowledge about alcohol and drug problems rather than on academic achievement alone.
2. Authority for this certification comes from the International Certification and Reciprocity Consortium (IC&RC) a consortium of over 70 member boards internationally representing professionals working in chemical dependency treatment or prevention who share a common concern for standards of competence.
3. The basic requirement for certification is the demonstration of competence in alcohol and drug counseling skills.
4. Application for certification is entirely voluntary.
5. Certification is offered to both members and non-members of the California Association of Alcohol and Drug Abuse Counselors.

Examination Development

The CCBADC utilizes the examination as developed, maintained and psychometrically validated through the International Certification and Reciprocity Consortium (IC&RC.) IC&RC has contracted with SMT (Schroeder Measurement Technologies) to develop, score, and administer the International Examination for Alcohol & Drug Counselors. SMT is an established full-service international testing company serving the needs of licensing boards and credentialing agencies with a wide range of test development and computer-based administration services at testing centers.

The development of a valid examination for the IC&RC credentialing process begins with a clear and concise definition of the knowledge, skills, and abilities needed for competent job performance. Using interviews, surveys, observation, and group discussions, IC&RC works with experts in the field of alcohol and drug abuse to delineate critical job components. The knowledge and skill bases for the questions in the examination are derived from the actual practice of the counselor in the alcohol and drug field as outlined in the 2008 IC&RC Alcohol & Drug Counselor Job Task Analysis. To read more on the examination development and/or content, please refer to the ADC Certification Handbook.

Examination Content

The 2008 IC&RC Job Task Analysis identified eight performance domains for the Alcohol and Drug Counselor. Within each performance domain are several identified tasks that provide the basis for questions in the examination. The TAP 21 Competencies and the 12 Core Functions are contained within the domains. Candidates will note that the final 13 questions on the exam all relate to a single case study, which is presented with those questions in the end of the exam booklet. Following is a brief outline of the domains and the tasks that fall under each domain. To read more on the examination development and/or content, please refer to the ADC Certification Handbook located at www.caadac.org

Important Information Regarding Exam

In December 2011, IC&RC began using pretest items on its exams. Pretesting allows IC&RC to streamline its exam development process, provide much needed data on questions, and increase the security of its exams.

On each IC&RC exam there are 25 “unweighted” items that do not count toward candidates’ final scores. Unweighted items are also called pretest items. Pretest items are not identified on exams and appear randomly on all exam forms. All exams are 150 questions in length, including the Advanced Alcohol and Drug Counselor (AADC), which was previously 175 questions.

Rescheduling, Cancelling, and Missed Exams:

1. Candidates taking CBT exams are now able to reschedule their examinations free of charge less than 5 days prior to their examination for the following FOUR reasons:
 - Jury Duty
 - Death in the immediate family
 - Medical illness
 - Military duty
2. Death in the immediate family or medical illness must have occurred within 14 calendar days prior to or on the day of the candidate's exam.
3. Candidates must provide documentation to IQT excusing them from their missed exam within 14 calendar days of their missed examination date in order to have their missed exam fee waived.

Appeals, Examination Grievances, Test Disclosure, and Retakes:

The following Examination Grievance Process has been established for candidates who feel that they have experienced an unusual event during the administration of their examination that has negatively affected their examination score:

Examination Grievances:

Candidates who believe an unusual event or condition related to the administration of their examination caused a significant adverse effect on their performance during their examination may submit a grievance regarding the exam administration to IC&RC for investigation.

Grievances must be submitted to IC&RC within 14 calendar days of the examination. Grievance statements must be submitted in writing, dated, and signed. Grievance statements must be accompanied by the IC&RC Exam Administration Grievance Form. Information to include in the grievance statement should include, but is not limited to:

Title of exam

Examination date

Name and location of testing center

Name of proctor on duty (if known)

Detailed explanation of the situation

Impact the situation had on exam performance

IC&RC will then investigate the specifics of the testing situation. When warranted, candidates will be offered a free retake. An exam grievance will not challenge the design or content of an examination nor overturn a failing score. There is a \$60 fee for this service. Candidates that are offered free retakes will be refunded their grievance fee. Candidates are now required to submit their Grievance within 14 calendar days of their examination and are required to complete the IC&RC Exam Administration Grievance Form found at the end of the candidate guide and on our website.

For further information regarding pretest items please visit IC&RC’s website at the following link:

<http://www.internationalcredentialing.org/news?mode=PostView&bmi=690907> .

Special Accommodations:

If you are requesting special exam accommodations due to a disability, you must submit proper documentation to our office. If you are asking for large print exams please note that it is considered to be a special accommodation request.

The candidate must provide official documentation of the accommodation requested. Submitted documentation must follow ADA guidelines in that psychological or psychiatric evaluations must have been conducted within the last three years. All medical/physical conditions require documentation of the treating physician's examination conducted within the previous three months.

CCBADC ALCOHOL/DRUG COUNSELOR CERTIFICATION PROCESS OVERVIEW:

STEP 1: PORTFOLIO (AKA: MANUAL)

- Complete and submit all documents required in this manual (aka portfolio) along with payments
- Approximately 2 weeks from the submission of your portfolio you will receive a letter from our office stating whether your portfolio has been approved or not.
 - If your portfolio is **approved** you will receive a letter indicating approval and subsequently an email notification from the testing company for you to schedule your exam.
 - If it is **not approved**, you will receive a letter indicating what is needed to bring your portfolio up to par with requirements, along with an invoice for an additional review fee of \$25.00 for each subsequent review.
 - Note after the initial review, each subsequent portfolio review you are charged \$25.00 so it is important to complete and send all documents accurately the very first time.
 - Additional reviews start the process over again.
 - Note, any delay's caused by the incomplete portfolio may result in the delay of your approval to take the examination.
 - The portfolio must be submitted, approved and the examination taken within six months from the time the office receives your portfolio. Failure to do so means you will be required to pay the examination fees again.

STEP 2: WRITTEN EXAM: The paper/pencil exam is no longer available starting in 2011.

Computer Based Test:

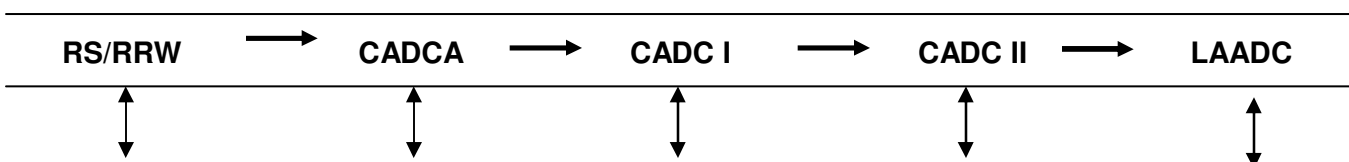
- Once you are approved to take the examination, you will be contacted by the testing company via email to schedule your exam. The testing company will provide you with full directions on how to do so on the web.
- Although the computer based test provides you with **preliminary** results, the final results will be sent to you from our office approximately 4 weeks following the exam.
- Upon taking and passing the written exam each passing candidate is provided a certificate for the first level of the ADC career path: The "CADCA" which is the Certified Alcohol and Drug Counselor Associate.
- If you do not pass the written exam you can apply after 90 full days have passed. However you are required to submit another written exam application and pay the examination fees again. Thereafter, you will be scheduled for the exam.

STEP 3: SUPERVISED WORK EXPERIENCE

- *Effective June 30, 2011* the Oral Exam will no longer be required. However, to advance to CADC I or CADC II you must complete the applicable required supervised work experience and provide documentation as listed.
- *Prior to 6/30/11* the oral exam was a requirement.
- The CADCA will be required to take the written exam that includes the clinical vignettes.
- To become a CADC I you are required to have a minimum of 4,000 hours of supervised experience and 6,000 for CADC II.

ADC CAREER PATH:

The ADC manual must be completed by any candidate who is entering the CCBADC career path to become a Certified Alcohol/Drug Counselor after they complete the necessary education component. The career path is designed to assist individuals in becoming fully certified at the reciprocal level (the highest level of certification within the program is currently the CADC II.) Each level requires a certain amount of experience and/or evaluation (test) to advance to the next level. See chart below:



Student/ Recovery
Worker (Registered)
Enrolled or working
Toward certification

Completed Previous
Steps & Education
Written Exam
Completed Practicum

Completed Previous
steps & minimum 4,000 hrs
of experience

Completed previous
steps & minimum
6,000 of hrs experience

MA Degree
180 ADC Ed
300 hrs practicum
2,000 hours exp

GENERAL & IMPORTANT INFORMATION REGARDING PORTFOLIO (AKA: MANUAL):

It is the **responsibility of the applicant to submit a complete portfolio along with payment** so please work off of the check off list to ensure that you have completed all of the required elements and submitted payment. If you fail to submit a complete portfolio, or documents are not completed correctly, ***applicants will be subject to an additional portfolio review fee of \$25.00 and consequently this will delay the processing of your portfolio and perhaps the date in which you are scheduled for the written examination.***

A complete portfolio consists of all items listed on the check off list and the portfolio review fee. Your transcripts must be official/kept in their sealed envelope and the Internship Evaluation must be returned to you and kept in a sealed envelope also. (If the envelopes are tampered with, The CCBADC reserves the right to request the documents from the school and/or supervisor) and this may result in further delays. It is the **responsibility of the applicant to follow up on these pending portfolio items and ensuring the portfolio is complete as well as paid for.**

Once a complete portfolio is submitted it becomes the property of the CCBADC and will remain as such. However, as per state regulations, the State of California Alcohol/Drug Programs may require copies of documents if any allegations of unethical conduct occur, we are bound to provide such documents per the regulation. Before submitting your complete portfolio and portfolio review fee you are encouraged to make and keep a copy of your portfolio for your records. If in the future you need copies of anything in your file you can find the request form on our website at: www.caadac.org, forms/docs, products. It is also suggested that you send your portfolio and portfolio review fee via *certified or registered mail, return receipt requested*. The CCBADC can not guarantee that any particular postal service or delivery service will deliver your documents or even deliver them by the deadline dates, therefore, it is the responsibility of the sender to use a service with time efficiency being the priority of the delivery.

Faxed copies of your portfolio **will not** be accepted, your original portfolio must be submitted via mail. The portfolio (completed manual) and written exam application must be submitted with payment. After submitting your complete portfolio and the portfolio review payment **you will only have six (6) months to take the written examination**. If you fail to take the written examination within the six months of receipt of your portfolio you will be required to pay the portfolio review fee again. When submitting your portfolio and written exam application, you must submit the appropriate fees along with the required documents, failure to do so may result in delays outside of the CCBADC's control.

The CCBADC Complies with IC&RC ADA Policy as follows: Candidates must make the request, by written means at minimum 60 days *prior* to examination scheduling for reasonable accommodations to be considered and provided if applicable. Qualified candidates requesting reasonable accommodations because of disabilities must provide (at their own expense) acceptable documentation of the condition/disability. Documentation must be provided that specifies the extent to which routine testing procedures needed to be modified. This will illustrate how these accommodations will prevent candidate's disabilities from interfering with the opportunity to demonstrate his/her knowledge, skills or abilities on board-conducted professional licensing and/or certification examinations. In addition to submitting the request, candidates must provide all medical, psychological, or educational evaluations that were used by professional healthcare providers in determining any reasonable testing accommodations. Candidates that have had reasonable accommodations in their professional program of study also must have either the Department Chairperson of the professional program or the program's Coordinator for Individuals with Disabilities, provide a letter. This letter shall explain the extent to which the candidate's disabilities require reasonable testing accommodations, the types of accommodations made for the candidate while in study at the school, and the justifications for those reasonable accommodations.

For more detailed information on the certification process and/or other certification topics please see the certification handbook at: www.caadac.org, forms/docs.

CCBADC ALCOHOL/DRUG COUNSELOR CERTIFICATION

CHECK OFF LIST:

Please fully complete each requirement and assure that all documents listed below are the originals when submitted. It is your responsibility to provide all documents listed below. Failure to do so will result in a delay of the processing of your portfolio and may also delay the date in which you are scheduled for the written examination. Reviews subsequent to the first review will result in a \$25.00 additional fee. Any document which must be submitted in a sealed envelope may not be tampered with. (The CCBADC retains the right to verify the legitimacy of the document with the entity/person who signed it.)

- Application** (be sure that it is complete and please note that you must have your high school diploma or GED to be eligible for the certification process)
- Code-of-Ethics** (Must be signed and dated within 60 days of submission to the office.)
- Scope-of-Practice** (Must be signed and dated within 60 days of submission to the office.)
- Official Transcripts** (must be official and kept and submitted in the sealed envelope from the school. Transcripts may also be submitted to the office electronically via email in PDF format to ccbadccertadm@caadac.org only if you are completing your portfolio online. Electronic transcripts may not have "Void" or "Copy" in the background to be official, and must be from a verifiable official representative of the school)
- Course descriptions**, as stated in the syllabus of each course or listed in the official School catalog, to be furnished by the applicant (unless the applicant is taking the course in a CAADAC/CCBADC/CFAAP approved program)
- Practicum Log** (be sure that it is completed by your supervisor and instructor, be sure that your supervisor is the same supervisor at the same facility on both the practicum log and the evaluation form. This form must be official and kept and submitted in the sealed envelope from the school. Your supervisor must sign every line, and dates must be in mm/dd/yyyy format.)
- Internship Evaluation** (be sure that it is completed by your supervisor, be sure that your supervisor is the same supervisor at the same facility on both the evaluation form and practicum log. This form must include dates in mm/dd/yyyy format with a total number of hours listed on this form. This form must be kept and submitted in the sealed envelope from your supervisor)
- Employment Verification Letter.** (Required for CADC I/II applications only.)
- For CADC I/II: Verification of Supervised Counseling Experience Form completed.** (Not required for CADCA.)
- Two (2) peer recommendation letters** (letters must be by your peers, not supervisors, instructors, etc and letters must attest to the applicant's character and competency and they must be typed, signed and dated and original documents must be submitted. Letters must be dated within 60 days of submission to the office.)
- Resume**
- A 2 x 2 Original Photo** (photo must be 2X2, copies of photos or photos of different sizes will no longer be accepted)
- Written Exam Application**
- Required fees** (see fees page)

CCBADC ALCOHOL/DRUG COUNSELOR CERTIFICATION

FEES:

All fees must be submitted when submitting your paperwork and fees are non-refundable and are subject to change without notice. Returned checks and declined credit cards will be assessed a fee of \$30.00. Portfolio and written exam fees are to be submitted with your portfolio. Again, if an additional portfolio review is required you will be invoiced a fee of \$25.00.

	<u>*CAADAC Full Member Discount</u>	<u>Non-Member</u>
Portfolio Processing Must be paid when portfolio is submitted	\$145.00	\$265.00
Written (ADC) Exam– Computer Based Must be paid when portfolio is submitted	\$164.00	\$240.00

If you reschedule or do not show up for the exam you were scheduled for you will be notified and have to pay a \$25.00 fee rescheduling fee and will need to submit another CBT written exam application and the examination fee again.

Important Notes:

Registered Students and Registered Recovery Workers do not qualify for the Full Member Discount; you must be a Full CAADAC Member to qualify for the Full Member Discount.

*CAADAC Full Member Discount: Full CAADAC Membership must be paid and current to qualify. If you would like to take out full CAADAC membership now you can, you can find the application on our website: www.caadac.org, forms/docs, membership.

TIMELINES: PORTFOLIO SUBMISSION, REVIEW & EXAMINATIONS

Effective Jan 1, 2011: All written examinations are completed via computer based testing (CBT.) The paper/pencil examination is no longer offered by the CCBADC. Additionally, the CBT is scheduled ON-DEMAND!

Once the candidate submits the application, required documents and fees the CCBADC will conduct a review of the application.

If the application/portfolio is approved, candidates will be notified in writing by the CCBADC within two weeks from receipt of the application/manual and subsequently, the testing company will contact you via email notifying you to schedule your examination. The testing company will provide directions on how to schedule yourself for the exam at one of the approved CBT sites local to you.

If the application/portfolio is incomplete candidates will be notified by the CCBADC in writing within two weeks from receipt of the application and the letter will indicate specifically what is required to complete the application. *Incomplete applications will result in the denial to take the exam until such time the application/manual is complete.*

All candidates have **not more than six months** from the date of receipt of your initial application to ensure all items required are submitted and within the same six month period candidates must take the exam. Candidates who do not provide such required documents and/or fees within the six months allotted, will be required to remit written examination fees again.

Note: If by chance you do not pass the written exam; you may reapply to take the written exam 60 days after each attempt. You must complete an additional application for the exam along with submitting the required fees. Examination fees apply for each examination taken.

Appeal: If a candidate has been denied certification or certification renewal, he/she may appeal such denial in writing to the CCBADC board which will be reviewed at its regularly scheduled board meeting which is at minimum four times per year. Additionally, such review may be conducted by the board via electronic or telephonic means. The board will provide a disposition letter following the review of the appeal/petition.

**CCBADDC ALCOHOL/DRUG COUNSELOR CERTIFICATION (ADC)
APPLICATION FOR CERTIFICATION**

Check one:

- Application for CADCA**
- Application for CADC I**
- Application for CADC II**

Please print or type

1. Name: Last _____ First _____ Middle Initial _____

2. Home Address No. & Street City & State Zip Code:

3. Home Phone: _____ Work Phone: _____ Cell Phone: _____

4. Male: _____ Female: _____

5. Date of Birth (Optional): _____

6. Email Address: _____

7. Social Security #: _____

8. CAADAC Member: Yes _____ No _____ Membership Number: _____

9. Ethnic Background (Optional): _____

10. Professional Affiliations: _____

11. Education:

Include: School Name, Dates Attended (From-To) and Major/Degree/Awards/Certificates:

(Must have High School Diploma/GED to be eligible for the certification process)

GED: _____

High School: _____

College: _____

Graduate School: _____

12. Have you ever been registered, certified or licensed in the human services field or alcohol/drug counseling field? (If yes, please indicate what certification or licensure body, the date(s) of certification or licensure and the status of the certification/licensure (i.e. expired, suspended, etc.))

**CCBADC ALCOHOL/DRUG COUNSELOR CERTIFICATION (ADC)
APPLICATION FOR CERTIFICATION**

STATEMENT OF UNDERSTANDING

I hereby affirm that this application is made on my own behalf and is entirely voluntary on my part. I hereby agree to waive the right to inspect the results of inquiries made by my employers, co-workers, references, educational institutions or any others, which were sought and secured in the process of making a determination as to my eligibility for certification and any such decision made by the CCBADC will be accepted by me without question. I hereby authorize hospitals, any type of business organization, schools, other organizations or persons named herein to release to the CCBADC any information they may have regarding me. I hereby release said parties of any and all liabilities arising out of the furnishing of the information that may be requested by the CCBADC in connection with this application. I understand that certification depends on my meeting the requirements and criteria established by the CCBADC. I understand CCBADC retains the right to verify all documents submitted within your application/portfolio and agree to such stipulation. If CCBADC is unable to verify any portion of the submitted documentation your application/portfolio I understand I may be denied for certification until such verification is obtained.

I understand that intentionally making false or misleading statements on this application will result in my being declared ineligible for certification. It is my responsibility to turn in course descriptions for classes of programs that are not approved by CAADAC/CFAAP. I understand and agree to the release of information of general demographic data from my application may be used for statistical purposes. The application/portfolio, exam and fees and portfolio become the property of CCBADC. *All fees are non-refundable.* I understand I must comply with the CCBADC Code of Ethics, Uniform Code of Conduct and CCBADC Scope of Practice along with all requirements of Department Of Alcohol And Drug Programs Adoption of Chapter 8 (commencing with Section 13000), and Amendment of Sections 9846, 10125, and 10564, Division 4, Title 9, California Code of Regulations. This section of the regulations indicate minimum requirements for certification, the CCBADC CADCA (with 2080 hours – 1 year experience), CADC I and CADC II far exceed the requirements of the regulation and thereby meet the requirements. I have read and understand the processes as outlined in the ADC Handbook describing policies and procedures and other pertinent information about certification.

I understand and agree to cooperate with any requests of the CCBADC with regard to processing this application; this includes submitting name changes, address changes, phone number changes, employer address changes (if applicable.) I understand I do not have to be a member of CAADAC to become certified by CCBADC.

Signature: _____ **Date:** _____

Print Name: _____

MANUAL/PORTFOLIO REVIEW FEES: \$145 CAADAC Members and \$265 Non-CAADAC members.

METHOD OF PAYMENT:

1. Check Money Order (Mail with fee to: **CCBADC**, 3400 Bradshaw Rd., Ste. B, Sacramento, CA 95827)

2. Visa MasterCard Amex Discover (Mail to address above)

Card Number _____

Expiration Date _____ 3 or 4 digit Security Code on Back _____ Total Amt \$ _____

Name as it appears on Card _____

Signature

Billing address for card

All fees must be submitted when submitting required documentation and fees paid to the CAADAC/CCBADC are non refundable and are subject to change without notice. Returned checks and declined credit cards will be assessed a fee of \$30.00.

Application, Page 2 of 2

CCBADC ALCOHOL DRUG COUNSELOR CERTIFICANTS/REGISTRANTS

CODE OF ETHICS

(For all Alcohol/Drug Counselors: Registrants and Certificants)

Principle 1: Non-discrimination

The alcoholism and drug abuse counselor/registrant must not discriminate against clients or professionals based upon race, religion, age, sex, handicaps, national ancestry, sexual orientation or economic condition.

Principle 2: Responsibility

The alcoholism and drug abuse counselor/registrant must espouse objectivity and integrity, and maintain the highest standards in the services the counselor offers.

- a. The alcoholism and drug counselor/registrant, as teacher, must recognize the counselor's primary obligation to help others acquire knowledge and skill in dealing with the disease of chemical dependency.
- b. The alcoholism and drug abuse counselor/registrant, as practitioner, must accept the professional challenge and responsibility deriving from the counselor's work.
- c. The alcoholism and drug counselor, who supervises others, accepts the obligation to facilitate further professional development of these individuals by providing accurate and current information, timely evaluations and constructive consultation.

Principle 3: Competence

The alcoholism and drug abuse counselor/registrants must recognize that the profession is founded on national standards of competence which promote the best interests of society, of the client, of the counselor and of the profession as a whole. The counselor must recognize the need for ongoing education as a component of professional competency.

- a. The alcoholism and drug abuse counselor/registrant must prevent the practice of alcoholism and drug abuse counseling by unqualified and unauthorized persons.
- b. The alcoholism and drug abuse counselor/registrant who is aware of unethical conduct or of unprofessional modes of practice must report such violations to the appropriate certifying authority.
- c. The alcoholism and drug abuse counselor/registrant must recognize boundaries and limitations of counselor's competencies and not offer services or use techniques outside of these professional competencies.
- d. The alcoholism and drug abuse counselor/registrant must recognize the effect of professional impairment on professional performance and must be willing to seek appropriate treatment for oneself or for a colleague. The counselor must support peer assistance programs in this respect.

Principle 4: Legal Standards and Moral Standards

The alcoholism and drug abuse counselor/registrant must uphold the legal and accepted moral codes, which pertain to professional conduct.

- a. The alcoholism and drug abuse counselor/registrant must not claim directly or by implication, professional qualifications/affiliations that the counselor does not possess.
- b. The alcoholism and drug abuse counselor/registrant must not use the affiliation with the California Certification Board of Alcohol/Drug Counselors or (CAADAC) for purposes that are not consistent with the stated purposes of the Association.
- c. The alcoholism and drug abuse counselor/registrant must not associate with or permit the counselor's name to be used in connection with any services or products in a way that is incorrect or misleading.
- d. The alcoholism and drug abuse counselor/registrant associated with the development or promotion of books or other products offered for commercial sale must be responsible for ensuring that such books or products are presented in a professional and factual way.
- e. The alcoholism and drug abuse counselor/registrant must not attempt to secure certification or registration (or certification renewal) by fraud, deceit, or misrepresentation on any application or other documents submitted to the certifying organization whether engaged in by an applicant for certification or registration or in support of any application for certification or registration. Any altered documents as identified by staff in the application or renewal process will be denied immediately and reapplication may be required and CCBADC Chairperson may deny application or reapplication as a result of such fraudulent activity.

- f. The alcoholism and drug abuse counselor/registrant must not violate, attempt to violate, or conspire to violate any regulation or law adopted by the California Alcohol and Drug Program Administration or CCBADC Policies and/or Code of Ethics.

Principle 5: Public Statements

The alcoholism and drug abuse counselor/registrant must respect the limits of present knowledge in public statements concerning alcoholism and other forms of drug addiction.

- a. The alcoholism and drug abuse counselor/registrant who represents the field of alcoholism counseling to clients, other professionals, or to the general public must report fairly and accurately the appropriate information.
- b. The alcoholism and drug abuse counselor/registrant must acknowledge and document materials and techniques used.
- c. The alcoholism and drug abuse counselor/registrant who conducts training in alcoholism or drug abuse counseling skills or techniques must indicate to the audience the requisite training/qualifications required to properly perform these skills and techniques.

Principle 6: Publication Credit

The alcoholism and drug abuse counselor/registrant must assign credit to all who have contributed to the published material and for the work upon which the publication is based.

- a. The alcoholism and drug abuse counselor/registrants must recognize joint authorship, major contributions of a professional character, made by several persons to a common project. The author who has made the principle contribution to a publication must be identified as a first listed.
- b. The alcoholism and drug abuse counselor/registrant must acknowledge in footnotes or an introductory statement minor contributions of a professional character, extensive clerical or similar assistance and other minor contributions.
- c. The alcoholism and drug abuse counselor/registrant must acknowledge, through specific citations, unpublished, as well as published material, that has directly influences the research or writing.
- d. The alcoholism and drug abuse counselor/registrant who complies and edits for publication the contributions of others must list oneself as editor, along with the names of those who have contributed.

Principle 7: Client Welfare

The alcoholism and drug abuse counselor/registrant must respect the integrity and protect the welfare of the person or group with whom the counselor is working.

- a. The alcoholism and drug abuse counselor/registrant must define for self and others the nature and direction of loyalties and responsibilities and keep all parties concerned informed of these commitments.
- b. The alcoholism and drug abuse counselor/registrant, in the presence of professional conflict must be concerned primarily with the welfare of the client.
- c. The alcoholism and drug abuse counselor/registrant must terminate a counseling or consulting relationship when it is reasonably clear that the client is not benefiting from it.
- d. The alcoholism and drug abuse counselor/registrant, in referral cases, must assume the responsibility for the client's welfare either by termination by mutual agreement and/or by the client becoming engaged with another professional. In situations when a client refuses treatment, referral or recommendations, the alcohol and drug abuse counselor must carefully consider the welfare of the client by weighing the benefits of continued treatment or termination and must act in the best interest of the client.
- e. The alcoholism and drug abuse counselor/registrant who asks a client to reveal personal information from other professionals or allows information to be divulged must inform the client of the nature of such transactions. The information released or obtained with informed consent must be used for expressed purposes only.
- f. The alcoholism and drug abuse counselor/registrant must not use a client in a demonstration role in a workshop setting where such participation would potentially harm the client.
- g. The alcoholism and drug abuse counselor/registrant must ensure the presence of an appropriate setting for clinical work to protect the client from harm and the counselor and the profession from censure.
- h. The alcoholism and drug abuse counselor/registrant must collaborate with other health care professional(s) in providing a supportive environment for the client who is receiving prescribed medications.

Principle 8: Confidentiality

The alcoholism and drug abuse counselor/registrant must embrace, as a primary obligation, the duty of protecting the privacy of clients and must not disclose confidential information acquired, in teaching, practice or investigation.

- a. The alcoholism and drug abuse counselor/registrant must inform the client and obtain agreement in areas likely to affect the client's participation including the recording of an interview, the use of interview material for training purposes, and observation of an interview by another person.
- b. The alcoholism and drug abuse counselor/registrant must make provisions for the maintenance of confidentiality and the ultimate disposition of confidential records.
- c. The alcoholism and drug abuse counselor/registrant must reveal information received in confidence only when there is clear and imminent danger to the client or to other persons, and then only to appropriate professional workers or public authorities.
- d. The alcoholism and drug abuse counselor/registrant must discuss the information obtained in clinical or consulting relationships only in appropriate settings, and only for professional purposes clearly concerned with the case. Written and oral reports must present only data germane to the purpose of the evaluation and every effort must be made to avoid undue invasion of privacy.
- e. The alcoholism and drug abuse counselor/registrant must use clinical and other material in classroom teaching and writing only when the identity of the persons involved is adequately disguised.

Principle 9: Client Relationships

The alcoholism and drug abuse counselor/registrant must inform the prospective client of the important aspects of the potential relationship.

- a. The alcoholism and drug abuse counselor/registrant must inform the client and obtain the client's agreement in areas likely to affect the client's participation including the recording of an interview, the use of interview material for training purposes, and/or observation of an interview by another person.
- b. The alcoholism and drug abuse counselor/registrant must inform the designated guardian or responsible person of the circumstances, which may influence the relationship, when the client is a minor or incompetent.
- c. Dual Relationships:
 - i. The alcoholism and drug abuse counselor/registrant must seek to nurture and support the development of a relationship with clients as equals rather than to take advantage of individuals who are vulnerable and exploitable.
 - ii. The alcoholism and drug abuse counselor/registrant must not engage in professional relationships or commitments that conflict with family members, friends, close associates or others whose welfare might be jeopardized by such a dual relationship.
 - iii. Because all relationship begins with a power differential, the alcoholism and drug abuse counselor/registrant must not exploit relationships with current or former clients for personal gain, including social or business relationships.
 - iv. Engaging in sexual relations with a client or with a former client within two years from the termination date of therapy with the client, soliciting sexual relations with a client, or committing an act of sexual abuse, or sexual misconduct with a client, or committing an act punishable as a sexually related crime, if that act or solicitation is substantially related to the qualifications, functions, or duties of an alcohol and other drug counselor.
 - v. The alcoholism and drug abuse counselor/registrant must not accept gifts from clients, other treatment organizations or the providers of materials or services used in practice.

Principle 10: Inter-professional Relationships

The alcoholism and drug abuse counselor/registrant must treat colleagues with respect, courtesy and fairness, and must afford the same professional courtesy to other professionals.

- a. The alcoholism and drug abuse counselor/registrant must not offer professional services to a client in counseling with another professional except with the knowledge of the other professional or after the termination of the client's relationship with the other professional.
- b. The alcoholism and drug abuse counselor/registrant must cooperate with duly constituted professional ethics committees, staff requests and promptly supply necessary information unless constrained by the demands of confidentiality. Failure to cooperate with the committee or staff may result in immediate suspension until such time cooperation is given. Additionally, the alcoholism and drug abuse counselor/registrant may not use threatening gestures, behaviors or other forms of coercion with the committee, colleagues, members, staff or other individuals.
- c. The alcoholism and drug abuse counselor/registrant must not in any way exploit relationships with supervisees, employees, students, research participants or volunteers.

Principle 11: Remuneration

The alcoholism and drug abuse counselor/registrant must establish financial arrangements in professional practice and in accordance with the professional standards that safeguard the best interests of the client, of the counselor and of the profession.

- a. The alcoholism and drug abuse counselor/registrant must inform the client of all financial policies. In circumstances where an agency dictates explicit provisions with its staff for private consultations, clients must be made fully aware of these policies.
- b. The alcoholism and drug abuse counselor/registrant must not send or receive any commission or rebate or any other form of remuneration for referral of clients for professional services. The counselor must not engage in fee splitting.
- c. The alcoholism and drug abuse counselor/registrant in clinical or counseling practice must not use one's relationship with clients to promote personal gain or the profit of an agency or commercial enterprise of any kind.
- d. The alcoholism and drug abuse counselor/registrant must not accept a private fee or any other gift or gratuity for professional work with a person who is entitled to such services through an institution or agency. The policy of a particular agency may make explicit provisions for private work with its client by members of its staff, and in such instances the client must be fully apprised of all policies affecting the client.

Principle 12: Societal Obligations

The alcoholism and drug abuse counselor/registrant must advocate changes in public policy and legislation to afford opportunity and choice for all persons whose lives are impaired by alcoholism and other forms of drug addiction. The counselors must inform the public through active civic and professional participation in community affairs of the effects of alcoholism and drug addiction and must act to guarantee that all persons, especially the needy and disadvantaged, have access to the necessary resources and services. The alcoholism and drug abuse counselor/registrant must adopt a personal and professional stance, which promotes the well being of all human beings.

The CCBADC is comprised of certified counselors who, as responsible health care professionals, believe in the dignity and worth of human beings. In practice of their profession they assert that the ethical principles of autonomy, beneficence and justice must guide their professional conduct. As professionals dedicated to the treatment of alcohol and drug dependent clients and their families, they believe that they can effectively treat its individual and families manifestations. CCBADC certified counselors dedicate themselves to promote the best interest of their society, of their clients, of their profession, and of their colleagues.

CALIFORNIA CERTIFIED AOD COUNSELORS – UNIFORM CODE OF CONDUCT FINAL VERSION JUNE 29, 2009

Note: This code of conduct does not replace the existing Code of Ethics as defined by the CCBADC it merely enhances it. Additionally, the CCBADC requires the most stringent rules be applied whether defined by CCBADC Code of Ethics or ADP's Uniform Code of Conduct.

This Code of Conduct shall prohibit registrants and certified alcohol and other drug (AOD) counselors from:

1. Securing a certification or registration by fraud, deceit, or misrepresentation on any application submitted to the certifying organization whether engaged in by an applicant for certification or registration or in support of any application for certification or registration.
2. Administering to himself or herself any controlled substance as defined in section 4021 of the Business and Professions Code, or using any of the dangerous drugs or devices specified in section 4022 of the Business and Professions Code or using any alcoholic beverage to the extent, or in a manner, as to be dangerous or injurious to the person applying for a certification or holding a registration or certification, or to any other person, or to the public, or, to the extent that the use impairs the ability of the person applying for or holding a registration or certification to conduct with safety to the public the counseling authorized by the registration or certification.
3. Gross negligence or incompetence in the performance of alcohol and other drug counseling.
4. Violating, attempting to violate, or conspiring to violate any regulation adopted by ADP.
5. Misrepresentation as to the type or status of certification or registration held by the person, or otherwise misrepresenting or permitting misrepresentation of his or her education, professional qualifications, or professional affiliations to any person or entity, and failure to state proper certification or licensure initials and numbers on business cards, brochures, websites, etc.
6. Impersonation of another by any counselor or registrant, or applicant for a certification or registration, or, in the case of a counselor, allowing any other person to use his or her certification or registration.
7. Aiding or abetting any uncertified or unregistered person to engage in conduct for which certification or registration is required.
8. Providing services beyond the scope of his/he registration or certification as an AOD counselor or his or her professional license, if the individual is a licensed counselor as defined in Section 13015.
9. Intentionally or recklessly causing physical or emotional harm to any client.

10. The commission of any dishonest, corrupt, or fraudulent act substantially related to the qualifications, functions, or duties of a counselor or registrant.
11. Engaging in sexual relations with a client or with a former client within two years from the termination date of therapy with the client, soliciting sexual relations with a client, or committing an act of sexual abuse, or sexual misconduct with a client, or committing an act punishable as a sexually related crime, if that act or solicitation is substantially related to the qualifications, functions, or duties of an alcohol and other drug counselor.
12. Engaging in a social or business relationship with clients, program participants, patients, or residents or other persons significant to them while they are in treatment and exploiting former clients, program participants, patients, or residents.
13. Verbally, physically or sexually harassing, threatening, or abusing any participant, patient, resident, their family members, other persons who are significant to them, or other staff members.
14. Failure to maintain confidentiality, except as otherwise required or permitted by law, including but not limited to Code of Federal Regulations, Title 42, Part 2.
15. Advertising that in reasonable probability will cause an ordinarily prudent person to misunderstand or be deceived; makes a claim either of professional superiority or of performing services in a superior manner, unless that claim is relevant to the service being performed and can be substantiated with objective scientific evidence; makes a scientific claim that cannot be substantiated by reliable, peer reviewed, published scientific studies.
16. Failure to keep records consistent with sound professional judgment, the standards of the profession, and the nature of the services being rendered.
17. Willful denial of access to client records as otherwise provided by law.

STATEMENT OF AGREEMENT AND UNDERSTANDING:

The undersigned hereby understands and agrees to comply with the CCBADC code of ethics and uniform code of conduct as outlined in this document. The undersigned also agrees to abide by the California Department of Alcohol and Drug Program Administrations Code of Conduct outlined in Chapter 8; Subchapter 3, Section 13060. The undersigned also understands and consents to the release of information pertaining to registration or certification, any ethical violation(s) and/or sanctions as part of the process of becoming and maintaining a CCBADC/CAADAC designation as a member, registrant, or a certificant. The information may be disclosed to the California Alcohol/Drug Program Administration, to the California state-approved certification bodies and/or employers. I consent to release of my information be allowed for CCBADC to contact any school, agency, supervisor or others to verify the information provided within my application/portfolio. I further agree not to sue CAADAC or CCBADC relative to the certification/examination process and I agree to indemnify and hold CAADAC and CCBADC and their respective officers, directors, agents, and employees harmless from any and all liabilities, losses, costs, damages, and any other expenses which CAADAC/CCBADC or their officers, directors, agents, and employees may sustain or incur as a result of or arising from the certification process. I agree to reimburse CAADAC and/or CCBADC for any attorneys' fees and costs incurred as a result of my breach of this hold harmless provision. I agree to cooperate with complaint investigations and supply information requested during complaint investigations unless such disclosure of information would violate the confidentiality requirements of Subpart 2, Title 42, Code of Federal Regulations. I understand failure to comply with the Ethics Review Committee or ADP may result in immediate suspension and/or revocation of my registration or certification until such time I comply. I understand the website will include the term "pending" as the status for any certification under administrative review by the state department and will remain as pending until such time the complaint is resolved and/or sanctions are completed by respondent as per notification from CA Alcohol/Drug Program (ADP); all suspensions and revocations will be posted on the public database (website).

Print
Name: _____

Signature: _____ Date: _____

SCOPE OF PRACTICE Alcohol/Drug Certificants and Registrants

Purpose:

To assure a consistent standard of quality education, training and experience for alcohol and drug counselors and registrants.

Certification/registration is necessary to safeguard the public health, safety, and welfare, and to protect the public from unauthorized services delivered by non-certified alcohol/drug counselors, and unprofessional contact by certified alcohol/drug counselors.

Requirements:

- a. Competencies required for alcohol/drug counseling include the TAP 21 competencies which also include the 12 Core functions: screening, intake, orientation, assessment, treatment planning, counseling, case management, crisis intervention, client education, referral, reports and record keeping, and consultation with other professionals.

A Certified Alcohol and Drug Counselor must successfully complete the requirements of each step in the career path. Each level of certification has specific competencies and examinations that one must successfully pass in order to become certified by CCBADC.

- b. The Certified Alcohol and Drug Counselor (in any place of the career path) as previously described must renew their certification every two (2) years by meeting the following:
 - Paying the renewal fee
 - Ascribing to the Professional Code of Ethics and Scope of Practice at each certification renewal periodCompleting a minimum of 60 hours of continuing education; 30 advanced hours, 30 professional development hours will be accepted (one can complete as many advanced hours he/she chooses, but no less than 30.) A minimum of 3 hours must be specific to Ethics each renewal cycle.

Role of the ALCOHOL AND DRUG COUNSELOR:

- a. To assist and support clients with alcohol/drug abuse or dependence, their family members and others to attain and maintain abstinence as appropriate.
- b. Develop a program tailored to the individual in support of a recovery process that will effect an improved quality of living.
- c. Provide quality professional counseling for clients with alcohol/drug abuse or dependence, their family members and others by means of: providing current and accurate information and education on the disease of alcoholism and other drug dependency issues and recovery processes, assisting in identifying and understanding the defense mechanisms that support continued addiction.
- d. Facilitate a process for clients to self-explore the consequences of alcoholism and other drug dependence.
- e. Utilize the functions of alcohol/drug counseling including: screening, intake, orientation, assessment, treatment planning, counseling, case management, crisis intervention, client education, referral, reports /record keeping and consultation.
- f. Assist in relapse prevention planning and recognizing relapse symptoms and behavior patterns.
- g. Provide current and accurate information and education to identification and understanding the roles of family members and others in the alcoholism/drug dependency system.
- h. Educate on how self-help groups (for example, Alcoholics Anonymous, Al-Anon, Women for Sobriety, Narcotics Anonymous, Secular Organization for Sobriety, Co-dependents Anonymous, etc.) complement alcoholism/drug addiction or dependency counseling and the unique role of each in the recovery process.
- i. Assist clients to establish life management skills to support a recovery process.
- j. Facilitate problem solving and the development of alternatives to alcohol/drug use or abuse and related problems of family members and others.
- k. Provide support as part of a treatment team and referring clients, family members and others to other appropriate health professionals as needed.

- l. Maintain appropriate records in a confidential manner for the purpose of treatment planning and

case management, provide all services in accordance with the California Certification Board of Alcohol and Drug Counselors Code of Ethics.

- m. Utilize the appropriate skills to assist in developing sobriety life management and communication skills that support recovery, including:
Active Listening • Intervention • Leading • Confrontation • Summarizing • Feedback • Reflection • Concreteness • Empathy • Education

Setting for the delivery of services:

- a. A Certified Alcohol and Drug Counselor Associate may conduct counseling of clients with alcohol/drug addiction or dependence, their family members and others in:
 - Hospitals
 - Agencies
 - Or other facilities where alcohol and/or drug services are delivered
- b. An interdisciplinary team in hospitals or other agencies shall include a person licensed by the State of California under the Medical Practices Act, the Social Work Licensing Law, the Psychology Licensing Act, or the Marriage, Family and Child Counselors Licensing Law at the setting or delivery of services.
- c. An independent setting is a professional office location where a Certified Alcohol and Drug Counselor I/II (or Equivalent) supervises the Registrants or Associates. While he/she delivers drug and/or alcohol counseling services to clients with alcohol/drug addiction or dependency, their family members and others.
- d. To be certified at the reciprocal level (CADC II) the individual must live or work within California at least 51% of the time.

Definitions:

- a. A Certified Alcohol and Drug Counselor Associate is a person who possesses and utilizes a competency-based core of knowledge and skills to assist alcohol/drug-affected persons, and those affected by the alcohol/drug affected person; a CADCA is the entry level certification for the CCBADC. He/She has completed the education, practicum, internship and has successfully passed the written examination.
- b. Family members and others are persons involved in an important relationship with an alcohol/drug affected person.

Non-Application:

- a. Nothing in this Scope of Practice shall be construed to constrict or limit the practice of any other professional licensed by the State of California under the Medical Practice Act, the Social Work Licensing Law, the Nursing Practice Act, the Psychology Licensing Act, or the Marriage, Family and Child Counselors Licensing Law.
- b. Nor shall the Scope of Practice apply to any priest, rabbi, or minister of the gospel of any religious denomination (when performing counseling services as a part of his or her pastoral or professional duties), or to any person who is admitted to practice law in the state, or who is licensed to practice medicine when providing counseling services as part of his/her professional practice.
- c. Nor shall this Scope of Practice apply to an employee of a governmental entity or of a school, college, or university or of an institution both non-profit and charitable if his/her practice is performed solely under the supervision of the entity, school or organization by which he/she is employed, and if he/she performs such functions as part of the position for which he/she is employed.

I, _____ the undersigned, certify that I have read, understand, and agree to abide by this Scope of Practice.

Signature: _____ Date: _____

Print Name: _____

This Scope of Practice supersedes the ICRC/AODA Inc. Scope of Practice.

CCBADC ALCOHOL/DRUG COUNSELOR (ADC)

DEFINITION OF A SUPERVISOR:

The supervisor who is verifying your internship or work experience (verifying your hours) must include their credential after their signature, if the supervisor is not certified with the CCBADC then they must submit to you to include in your portfolio a resume or brief letter explaining how they meet one of the definitions below.

It is your responsibility to make sure before you start your internship that the person supervising you meets one of the following definitions:

Definition of a supervisor:

A supervisor is defined as “Any CCS, CADC-I and CADC-II or any person who has documented education, training and experience that is *comparable to, or exceeds the above certifications.”

*Definition of comparable to:

- Any person with a Masters Degree in behavioral health discipline and three years on the job supervised experience in delivering counseling services consistent with the 12 core functions.
- Any person with a Bachelors Degree in behavioral health discipline and five years on the job supervised experience in delivering counseling services consistent with the 12 core functions.
- Any person with an Associates Degree in a behavioral health discipline and seven years on the job supervised experience in delivering counseling services consistent with the 12 core functions.
- Any person with nine years on the job supervised experience in delivering counseling services consistent with the 12 core functions.
- The 12 core functions include the following: (1) Screening, (2) Intake, (3) Orientation, (4) Assessment, (5) Treatment Planning, (6) Counseling (individual, group, and significant others), (7) Case Management, (8) Crisis Intervention, (9) Client Education, (10) Referral, (11) Reports and Recordkeeping, (12) Consultation (with other professionals in regard to client treatment and services.)

ALCOHOL AND DRUG COUNSELOR (ADC)**SUPERVISED FIELD (INTERNSHIP) WORK PRACTICUM LOG
WITH INSTRUCTORS/SUPERVISORS VERIFICATION/INFORMATION**

Intern name: _____

Supervisor's and Instructor's Directions: By attesting and signing your name to each core function, from/to dates and total hours completed you are confirming that the Intern has actually completed the required 21 experiential hours in the specific core function area as indicated. It is your responsibility to verify the completion of hours by using this log. No other forms will be accepted and the failure to complete this log may result in the inability of the candidate to take the certification written exam. **Do not use white out on this form, any corrections or erasers will invalidate this form.** This original practicum log must be submitted with the portfolio. This blank practicum log may be duplicated if the practicum was completed in more than one facility/agency.

* Please note that the supervisor completing the practicum log must be the same supervisor who completes the evaluation form.

CORE FUNCTION	DATE FROM:	DATE TO:	TOTAL HOURS	SUPERVISOR'S SIGNATURE
Screening				
Intake				
Orientation				
Assessment				
Treatment Planning				
Counseling				
Case Management				
Crisis Intervention				
Client Education				
Referral				
Reports and Record Keeping				
Consultation with Relevant Professionals				

Supervisor's Information:

Print your name: _____ Email Address: _____

List your Credential/License/Certification Held: _____

How many years have you worked in the AOD field? _____ Contact Number :(____)_____

Name of the agency where you supervised the Intern: _____

Instructor's Information:

Print your name: _____ Email Address: _____

Your signature: _____ Date: _____

School name: _____

ALCOHOL AND DRUG COUNSELOR (ADC) INTERNSHIP EVALUATION FORM

Intern name: _____
 Internship dates: From: _____ To: _____ Total Hours: _____

EVALUATION AREA	EXCELLENT	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	NO BASIS FOR JUDGMENT
ANALYTICAL ABILITY					
Understanding of agency					
Understanding of community					
Understanding of clients					
Use of knowledge sources					
Use of evaluation					
Understanding of substance abuse					
ADMINISTRATION					
Use of supervision					
Documentation					
Recording					
Referral					
INTERPROFESSIONAL RELATIONS					
With clients					
With Peers					
With supervisors					
With community groups					
Ethical Practices					
PRACTICUM SKILLS					
Screening					
Intake					
Orientation					
Assessment					
Treatment Planning					
Counseling					
Case Management					
Crisis Intervention					
Client Education					
Referral					
Reports and Record Keeping					
Consultation					
KNOWLEDGE					
Human behavior					
Signs/symptoms of chemical dependency					
Counseling approaches					
Continuum of care					
Federal/State/local regulations/statutes					
State Alcohol/Drug Program System					
Cultural competence					
WORK HABITS					
Initiative					
Organization Skills					
Quality of Work					
Integrity					
Responsibility/accountability					
Self Discipline					
Sensitivity to others					

Yes, I highly recommend Yes, I recommend, with reservations
 No, I do not recommend **(Please use a separate sheet if there are additional comments)**

Supervisor's name (print): _____ Title: _____
 Supervisor's signature: _____ Date: _____
 Name of the agency where you supervised the Intern: _____

Please note that the supervisor completing the evaluation form must be the same supervisor who completed the practicum log.

VERIFICATION OF SUPERVISED COUNSELING EXPERIENCE
FOR CADC I OR II ONLY!

The CADC I requires a total of 4,000 hours of supervised work experience. CADC II requires a total of 6,000 hours of supervised work experience (the form is mailed to you once you have passed the written exam or you can download it from our website at www.caadac.org under forms/docs.)

Dear Supervisor,

I am in the process of seeking certification from the CCBADC as a competent, professional Alcohol/Drug Counselor. I have identified you as someone in a position to supervise hours of alcohol/drug counseling.

I hereby consent for you to release the following required confidential information to the CCBADC.

Applicants Name: _____

Signature: _____

I _____ certify that I have supervised the applicant for a total of (denote correct number of hours in relevant counseling experience below.)

Supervision dates: From: _____ To: _____
Date Date

CADC I _____ clock hours of supervised work experience as a alcohol/drug counselor at a site where alcohol/drug services are offered.

NOTE: CADC I requires a total of 4,000 hours of supervised work experience.

CADC II _____ clock hours of supervised work experience as a alcohol/drug counselor at a site where alcohol/drug services are offered.

NOTE: CADC II requires a total of 6,000 hours of supervised work experience.

CADC II - EDUCATION IN LIEU OF EXPERIENCE: An associate's degree in behavioral science may substitute for 1000 hours; a bachelor's degree in behavioral science may substitute for 2000 hours; a master's degree in behavioral science may substitute for 4000 hours.

Print Name _____ Title: _____

Facility Name: _____

SIGNATURE: _____ DATE: _____

May be given to the applicant, but only if provided in a sealed envelope (tamped envelopes will not be accepted.)

This form may be duplicated as needed.

**APPLICATION FOR ADMISSION TO THE *COMPUTER BASED TESTING (CBT)*
ADC WRITTEN EXAM FOR CERTIFICATION**

_____		_____	
Name (Print)		Social Security Number	
_____		_____	
Phone Number (including area code)		Email Address	

Address	City	State	Zip

COMPUTER BASED TESTING SITES: For a complete list of current testing sites in CA follow the steps below:

1. Go to the following link to chose your preferred site:
 - a. <http://isoqualitytesting.com/mlocations.asp>
2. Testing Centers –
 - a. Select a Country: United States
 - b. Select a State: California
3. **Enter Preferred Location (testing site locations):** _____

Type of Exam: (check one): _____ ADC _____ CCS _____ CCPS _____ CCJP _____ SAP

IMPORTANT EXAM INFORMATION (PLEASE READ):

This completed application along with the exam fee (see fee page) **MUST BE RECEIVED** (not postmarked) in the CAADAC office with your completed portfolio. Our office staff will submit your information to the IC&RC approximately 2 weeks after the written exam deadline date (see time lines page.) After which you will receive an email from the testing corporation contracted with the IC&RC with instructions on how to schedule the date, time and location of your written exam. You will also have the ability to print your admission letter after you have successfully registered. The admission letter will give you all of the information that you will need to know regarding your exam date. If you have any questions/comments please email them to counselors@caadac.org. Although you receive your *preliminary* written exam results immediately after your written exam, they are not official until you receive them from our office which is approximately 4 weeks after the written exam date. Please do not contact the office regarding not receiving your written exam results until after the end of the 4th week.

Final notes: Make sure that you are at your exam site earlier then what your scheduled exam start time is so that you may give yourself time to get settled in. If you arrive after your scheduled exam time you are considered late and you will not be able to take the exam. There are no exceptions! Make sure that you bring only what you need to into the exam. For example, your written exam admission letter, 2 copies of your ID (1 must be a photo), your car keys, eye glasses and a water bottle. Nothing further will be allowed. You will not be allowed to use your own pencils, will not be allowed to take any examination information outside of the testing area or outside of the proctor's supervision. You will be required to sign out the booklet and answer sheet and sign at the completion of the exam. CCBADC has no tolerance for cheating.

METHOD OF PAYMENT: Return this application with the appropriate fee (\$240.00 CBT Written Exam fee for non CAADAC members and \$164.00 CBT Written Exam fee for full CAADAC members.) All fees are non refundable so if you reschedule or do not show for the exam you will not be refunded the CBT Written Exam fee that you previously submitted and you will be charged an additional \$25.00.

1. _____ Check _____ Money Order (Mail with fee to: **CCBADDC**, 3400 Bradshaw Rd., Ste. A-5, Sacramento, CA 95827)
 2. _____ Visa _____ MasterCard _____ Amex _____ Discover (Mail to address above or fax to: CAADAC 916-368-9424)
- Card Number _____

Expiration Date _____ 3 or 4 digit Security Code on Back _____ Total Amt: \$ _____

Name as it appears on Card: _____

Signature _____

All fees must be submitted when submitting your paperwork and fees paid to the CAADAC/CCBADDC/CFAAP are non refundable and are subject to change without notice. Returned checks and declined credit cards will be assessed a fee of \$30.00.