



NOTICE:

All NDBACE files are subject to the North Dakota Open Records Law

RETURN FORM TO:

North Dakota Board of Addiction Counseling Examiners
1601 N 12th St Suite 609
Bismarck, ND 58501

Clinical Trainee Completion Form

Upon completion of a training program, the Clinical Training Program Director must complete this form and return it to the board office. You must also include a copy of the trainee's final monthly performance review.

Trainee Information

Last Name: _____

First Name: _____

Middle Name: _____

Maiden Name: _____

Name of Clinical Training Program: _____

Training Completion Date: _____

Has the trainee completed the following requirements (write N/A if not applicable)?

LAC:

- Completed a minimum of 960hrs of clinical training **Yes/ No**
- Received 40hrs of direct, face-to-face supervision in each of the following clinical training areas (screening and ASAM assessment, treatment planning, counseling, and client/family/community education. **Yes/ No**
- Received 30hrs of training in the area of documentation, which must include the supervisor reviewing and discussing clinical notes with the supervisee. **Yes/ No**

LMAC:

- Completed a minimum of 700hrs of clinical training **Yes/ No**
- Received 30hrs of direct, face-to-face supervision in each of the following clinical training areas (screening and ASAM assessment, treatment planning, counseling, and client/family/community education. **Yes/ No**
- Received 20hrs of training in the area of documentation, which must include the supervisor reviewing and discussing clinical notes with the supervisee. **Yes/ No**

If the trainee is a ND licensed LPCC, LP, MD, LMFT, LICSW, or advanced clinical practice nurse, he or she must complete a minimum of 350hrs of clinical training.

Clinical Training Program Director Name and Credentials: _____

Address: _____

Phone: _____ Email Address: _____

I verify that the above-named trainee has completed _____ hours of clinical training, which included the required hours of supervision in the required clinical areas (screening, assessment, and treatment planning; counseling services; service coordination, case management, and referral services; documentation; multicultural counseling, education, and professional ethics).

Clinical Training Program Director Signature

Date