NORTH DAKOTA BOARD OF ADDICTION COUNSELING EXAMINERS

NDBACE

NOTICE:
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RETURN FORM TO:
North Dakota Board of Addiction Counseling Examiners
P. O. Box 1053
Bismarck, ND 58502
board@ndbace.org

Clinical Supervisor Requirements and Application

The following qualifications and conditions must be met by a Licensed Addiction Counselor (LAC) to receive approval as a Clinical Supervisor.

1. The applicant must have three years (6,000 hours) of supervised experience as a Licensed Addiction Counselor.
2. The applicant must have completed a minimum of twenty contact hours of continuing education in clinical supervision within 3 years of application date.
3. The applicant must submit two letters of reference on the Reference Form and recommendation from board-registered Clinical Supervisors.

Individuals choosing to continue their clinical supervision registration must submit verification of completion of 3 hours of clinical supervision related coursework within the two-year continuing education cycle in order to maintain clinical supervisor status.

Clinical Supervisor Application

IDENTIFYING INFORMATION:

Last Name: First Name:

Middle Name: Maiden Name:

Home Address:

Home Phone: Work Phone:

Email Address:

CURRENT EMPLOYMENT:

Agency:

Address:

Clinical Supervisor's Name:

Dates of Employment:

EMPLOYMENT HISTORY:

(Last 3 years of employment)

Agency:

Address/Phone:

Clinical Supervisor's Name:

Dates of Employment:

Agency:

Address/Phone:

Clinical Supervisor's Name:

Dates of Employment:

Agency:

Address/Phone:

Clinical Supervisor's Name:

Dates of Employment:

NORTH DAKOTA LICENSE INFORMATION:

ND License Number:

Dates of original certification/licensure:

Years of licensed/certified addiction counseling experience:

CONTINUING EDUCATION VERIFICATION:

Attach verification of 20 hours of clinical supervision continuing education contact hours.

SIGNATURE:

I verify that this information is true in every aspect.

Date Signature of Applicant Date Signature of Clinical Supervisor