

# ALABAMA ASSOCIATION OF ADDICTION COUNSELORS CERTIFICATION COMMISSION (AAACCC)

## RENEWAL APPLICATION FOR CERTIFIED ADDICTION COUNSELOR

**Thank you for applying for renewal as a Certified Addiction Counselor (CAC).**

**Please note:** Certifications that have been expired for over 30 days will be subject to an additional \$25 fee for every 30 days of expiration with a maximum fee of \$100. Please make sure to complete all sections of the application and include all required supporting documentation.

### **I. Personal Data**

Please provide complete contact information in the space below. If you have experienced a change in your name, you must submit a copy of the legal document showing that change.

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/ZIP \_\_\_\_\_

Phone (w): \_\_\_\_\_ (cell): \_\_\_\_\_

E-mail: \_\_\_\_\_

### **II. State Credential/License**

Please submit a copy of your current credentials as a Certified Addiction Counselor issued by the Alabama Association of Addiction Counselors Certification Board. **Applications cannot be processed without copies of your current credentials and/or licenses.**

In addition, please list current credentials or licenses here:

Credential/License	Number	State/Authority	Expiration Date
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### **III. Career History**

Please provide your Substance Use Disorder/Addiction counseling career history for the past two years only. Please list your current position first and work backwards until you have documented up to your last certification term start date. Attach additional pages as needed.

Current Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Job title: \_\_\_\_\_

Position held from (*month/year*) \_\_\_\_\_ to (*month/year*) \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Supervisor's Email Address: \_\_\_\_\_

Brief job description:

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Job title: \_\_\_\_\_

Position held from (*month/year*) \_\_\_\_\_ to (*month/year*) \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Supervisor's Email Address: \_\_\_\_\_

Brief job description:

#### IV. Continuing Education Hours

A total of 40 contact hours of education/training (online or in-person) is required within the two years between the start date of your current credential and the upcoming expiration date. No more than 75% of contact hours may be online.

Please read and attest to the statement below through your signature.

*“I certify that I have completed the necessary 40 hours of education/training within the appropriate time frame to support this application, and that I will provide documentation of that training to the AAACCC within 30 days of any audit request by that body.”*

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Signature

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Date

#### V. NAADAC Code of Ethics

All those holding AAAC Credentials are required to adhere to the NAADAC/NCC AP Code of Ethics. Ethics code violations may result in disciplinary action, including loss of your credential. The full NAADAC/NCC AP Code of Ethics is located in full at [www.naadac.org/code-of-ethics](http://www.naadac.org/code-of-ethics).

*“I hereby attest that I have read, understand, and will adhere to the NAADAC/NCC AP Code of Ethics.”*

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Signature

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Date

#### VI. Candidate's Affirmation

*“I certify that I meet the eligibility requirements for the CAC state credential, and that the information in this application and its supporting documents is accurate, correct and complete. I also certify that the state credential/license presented is not encumbered in any manner and that I do not hold a credential/license from any other state that is or has been subject to criminal or ethical complaint. The Alabama Association of Addiction Counselors Certification Commission (AAACCC) is authorized to contact any institution, organization or individual listed on or included with this application for verification of my substance use disorders counseling history. I understand that the AAACCC retains ownership of the CAC credential and may, from time to time, make available credential holder names and other information to potential service users.”*

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Signature

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Date

## VII. Payment/Fee Information

**Credential:** ☐ CAC ☐

**Renewal Fee:** \$ 125.00 (non-refundable)

### Candidate's Checklist

**Please note:** Incomplete applications will be subject to an additional \$50 administrative fee. Please make sure to complete all sections of the application and include all required supporting documentation.

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Completed/Updated Personal Data

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Submitted fee electronically (The AAACCC has a no refund policy for incomplete applications.)

**Or**

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Mailed check/money order (The AAACCC has a no refund policy for incomplete applications.) to: AAACCC C/O GFG Counseling and Consulting Services, 640 S. McDonough St., Ste. 6, Montgomery, AL 36104 (**Please note that mailing in payments can delay the processing of the application. Application will not be processed until fees paid and verified.**)

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Enclosed copy of current credentials or licenses as a Certified Addiction Counselor issued by a state or credentialing authority.

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Completed Career History Section

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Completed Continuing Education Section

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Signed statement that candidate has read, understands, and will adhere to the NAADAC/NCC AP Code of Ethics

Application and payment should be submitted through the website or emailed to the account below:

**AAACCC**

**[certification@alabamaaddictioncounselor.com](mailto:certification@alabamaaddictioncounselor.com)**