



MAIL: 1731 Howe Ave, PMB #352, Sacramento, CA 95825-2209
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**REGISTRATION FOR INITIAL CERTIFICATION
as an
ALCOHOL AND OTHER DRUG COUNSELOR**

NOTE: Regulations adopted by the California Department of Alcohol and Drug Programs, as effective April 1, 2005, require individuals who are not licensed professionals or who have not been previously certified as specified in the regulations to register with one of ten designated organizations no later than October 1, 2005, or within six months of initial employment as a counselor in any program certified or licensed by the Department. CADDTP is one of the ten organizations. CAVEAT: The regulations allow employers to determine which of ten organization certifications it will accept. Potential registrants are advised to check with their employer, if any, before registering with CADDTP.

This completed form, along with a check or money order in the amount of fifty dollars (\$50), or the completed credit card information form that is available at www.caddtp.org, should be mailed to the above address. You must allow up to two weeks for the registration to be processed. CADDTP can not be responsible for your failure to register in a timely manner. By signing and submitting this form, you confirm that you have read CADDTP's counselor certification requirements (also at the web site). NOTE: You must complete the requirements for certification within five years. You must also submit a signed (original) copy of CADDTP's Code of Ethics with this registration form (also at the web site). You will receive written confirmation of receipt of your registration.

Please type or print legibly:

FULL NAME: _____

ADDRESS: _____

PHONE: _____ E-MAIL: _____

EMPLOYER (if any): _____

ADDRESS: _____

ALCOHOL/DRUG STUDIES PROGRAM (if any): _____

LOCATION: _____

SIGNATURE: _____ DATE: _____