

NAADAC TRAINER'S ACADEMY APPLICATION

Name: _____

Address: _____

Business Telephone: _____ Home Telephone: _____

Fax: _____ Mobile Telephone: _____

E-Mail address: _____

Business address: _____

Please list the titles of training events which you have presented. Please attach additional pages if necessary.

Please state the reason why you wish to be a trainer in the NAADAC Trainer's Academy.

Please submit the following:

- Copy of resume or curriculum vitae
- Copy of transcript from an accredited university
- Copy of training descriptions or program outlines
- Copy of cumulative evaluations from trainings you have conducted
- Three letters of reference from individuals or organizations who you have worked as a trainer. Also include contact information, name, address, telephone etc for each reference
- A list of training events you wish to conduct if different from list above

Please circle the areas in which you have training experience:
Basic Training

- Case Management
- Ethics/Confidentiality/ HIPAA Compliance
- Pharmacological Interventions
- Assessment/Treatment Planning
- Prevention and Early Intervention
- After Care/Continual Care
- Cultural Sensitivity
- Co-Occurring Disorders
- ASAM/DSM IV –R
- Seclusion and Restraint
- Children and Families
- Homelessness
- Aging
- HIV/AIDS and Hepatitis
- Gambling

Advanced Training

- Clinical Supervision
- Disaster Response/PTSD
- Business Management for supervisors
- Cultural Sensitivity
- Co-Occurring Disorders
- ASAM/DSM IV –R
- Homelessness
- Aging
- HIV/AIDS and Hepatitis
- Criminal Justice, mandated treatment
- Adolescent Treatment Approaches
- Buprenorphine and Opiate Replacement Therapy
- Risk Management
- Gambling
- Cyber Dependence
- Tobacco Cessation
- Eating Disorders

Agreement

I understand by submission of this application, my acceptance as a NAADAC Trainer is not guaranteed.

I attest that all information submitted as part of this application is true.

Should I be chosen as a trainer for NAADAC, I agree to use the materials provided by NAADAC as instructed.

Should I contract for the use of any materials I have developed I understand that NAADAC will have rights to its use until or unless the contract is voided.

Signature of Applicant

Date