

Addiction Professionals Certification Board, Inc. fax: 732-249-1559 www.certbd.org



Written Exam Registration Form

IC&RC Reciprocal Credentials

Dates and locations of the exams can be found at certbd.org/testing/

Name:	as it should appear on your certificate, include middle initial)	
Email:		
Home address		
City	StateZIP	
Home phone #	Cell phone #	
Date you will be taking written exam	:	
Check Exam to be taken:		
	a copy of your DCA-ADCC (973-504-6369) test approval lett	er
to this registration form!		
ADC Spanish Language (LCADC/CADC	C) You must attach a copy of your DCA-ADCC (973-504-6369)
test approval letter to this registration for	rm!	
CPS Certified Prevention Specialist (C	PS) CDP Certified Co-occurring Disorder	
CCS Certified Clinical Supervisor (CCS) Professional (CCDP)	
CJP Certified Criminal Justice Professi	ional AADC (Advanced ADC- must hold LCAD	
(CCJP)		
Check here if you require assistance a	as per the American Disabilities Act. You must send current,	
written documentation from a health car	e professional licensed to treat your disability as well as the	
requested accommodation with this form	1.	
- · · · - · · · · · · · · · · · · · · ·	omplete forms to The Certification Board of New Jersey or by	
	Make check or money order payable to The Certification Board, leading the property to the text data. If you do not receive within	
one week of the exam date, contact the Board	nailed two weeks prior to the test date. If you do not receive within	1
•	ovide individual confirmation requests. Use the US Post Office	
·	n that we received your registration. Registration letter and direct	ions
	date. If you do not receive within one week of the exam date, con	
	e added to any re-scheduled test prior to the day before the exam.	
Cancelations within 24 hours of the exam, or	no-shows, will not be eligible for a refund. I our office from the IC&RC. You should receive your results in fou	r
weeks.	Tour office from the ICARC. Tou should receive your results in four	ı
Exam fee must accompany this application	on:	
Check or money order		
	online and are mailing in this with your current Test	
Approval letter from the DCA-ADC	,	