

## Advanced Alcohol and Drug Counselor

### Reciprocal Credential

The AADC requires a current, reciprocal LCADC in New Jersey issued by the Board of Marriage and Family Counselors, Alcohol and Drug Committee. To qualify for the AADC, you must have renewed your LCADC through July 2018 and have passed the IC&RC written and oral examinations if you were licensed or certified by the DCA-M&F Board after 2005. Additionally, you must hold a clinical or counseling degree at the Masters or Doctoral level and pass the IC&RC's Advanced ADC exam.

The AADC recognizes that you have met the reciprocal requirements for similar credentials throughout the US and many foreign countries, including Canada, Spain, Germany, India, Mexico and many more. You can check the full list of all boards by going to the IC&RC's website at <http://www.icrcaoda.org/member.asp>.

The initial certification fee covers your AADC with the Certification Board as well as the IAADC with the IC&RC. In addition to an AADC certificate from the APCB, Inc. you will also receive a separate IAADC certificate verified by the IC&RC that can be recognized in over 80 Boards worldwide that include 45 US State Boards, the Four-Armed Forces, US Territories etc. You may only use the AADC in conjunction with your reciprocal, active New Jersey LCADC. If your New Jersey license expires, or terminated for any reason, your AADC certificate automatically expires with the Certification Board, Inc. As long as it is active, you may transfer it to another IC&RC Board and activate it there without the NJ LCADC.

Please complete the information on the following page and upload or mail with your \$150 ICADC initial application fee, (payable to the Certification Board, Inc. or the APCB, Inc.), to the Certification Board.

If you became an LCADC after 2005, you must complete numbers 1-2 below to verify that you have passed the written exam and oral exams, as it is a requirement for International Reciprocity thru New Jersey.

**Upload or send the below form to the Certification Board.**

Do not send back the Ethics statement.



## Advanced Alcohol and Drug Counselor application form

Name: \_\_\_\_\_

As You Want It to Appear on Your Certificate (No Degrees or Licenses)

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

County: \_\_\_\_\_ Home Phone #: \_\_\_\_\_

Highest Degree of Education: \_\_\_\_\_ Email: \_\_\_\_\_

Agency currently employed: \_\_\_\_\_

1. Attached a copy my LCADC active through 2018.

2. **Attached is a copy of my three test scores**

or

I passed the IC&RC Written AADC exam on \_\_\_\_\_ month \_\_\_\_\_ year

and

I passed the IC&RC Written ADC exam on \_\_\_\_\_ month \_\_\_\_\_ year

and

I passed the New Jersey LCADC Oral Exam on \_\_\_\_\_ month \_\_\_\_\_ year.

**By signing below, I verify that I live or work in New Jersey a minimum of 51% of the time.**

Signature: \_\_\_\_\_ date: \_\_\_\_\_

Read each of the below statements.

- **AADC Ethics Statement** <https://certbd.org/site/wp-content/uploads/ethical-standards-advanced-alcohol-and-drug-counselor.pdf>
- **Statement of Understanding** <https://certbd.org/applications/recognition-statement/>
- **Authorization and Release and Applicant Recognition Statement** <https://certbd.org/applications/authorization-release-understanding/>

By signing below, I verify that I have read each of the above documents and agree to abide by each:

Signature: \_\_\_\_\_ date: \_\_\_\_\_

Witness Name: \_\_\_\_\_

Witness Signature: \_\_\_\_\_ date: \_\_\_\_\_