



ABCAC

P. O. Box 3266
Chandler, AZ 85244
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Arizona Board for Certification of Addiction Counselors

A.B.C.A.C. Board Member Application

The Arizona Board for Certification of Addiction Counselors (ABCAC) Board member term is five years. A nominating committee appointed by the President presents names of eligible persons for election to the Board. If you wish to apply for Board membership, please complete and return this application to:

ABCAC
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1. Name: _____

2. Phone number(s): _____

3. Address: _____

4. Give a brief chronological listing of employers, positions and duties you have had in the addiction and/or mental health field:

5. Are you currently ABCAC certified as a CADAC?

Yes _____ No _____

If yes, in what year were you originally certified by ABCAC _____.

6. ABCAC is an active, working Board. You would be required to attend quarterly Board meetings, serve on committees, and perform various other tasks related to certification. Are you willing to make this commitment?

Yes _____ No _____

7. Please indicate any special skills or expertise you possess which might be useful to ABCAC:

8. Briefly, why do you wish to serve on the Board?

9. ABCAC Also needs experienced people to serve on committees. If not elected to the Board it may simply be because no positions are available at the time you apply. Would you be willing to serve in any of the following ways?

_____ Ethics committee

_____ Credentials Committee

_____ Public Information Workshop

10. Anything else you would like us to know about you in making our decision?

Signature

Date