



# Alcohol & Drug Abuse Certification Board of Georgia

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P.O. BOX 250449  
Atlanta, GA 30325

770.825.0481 Fax: 770.790.0018  
ADACBGA.org info@adacbga.org

Dear CGAC Applicant:

Enclosed is your informational packet and application packet for the Certified Gambling Addiction Counselor (CGAC). You may duplicate forms as necessary. Please consult your informational packet for details on the requirements for documentation and have transcripts from colleges and universities sent directly to the Board. Please be sure you are submitting the most current version of this application per the revision date in the lower left hand corner of each page. You may duplicate this entire packet for distribution to colleagues or other prospective applicants. When you have completed your part of the packet, send it to the above address with your application fee of \$150. Once your application is complete and approved, you will be notified of eligibility to sit for and how to apply for the exam.

Note: Personal and professional recommendations are to be sent directly to the ADACBGA. They may be returned to the applicant *only* if placed in a sealed envelope with the evaluator's signature across the back seal. Please duplicate the respective forms and give them to the appropriate persons.

## **Certified Gambling Addiction Counselor (CGAC)**

Certified Gambling Addiction Counselors fill a unique role among health and human services professionals in providing quality care to consumers. The Alcohol and Drug Abuse Certification Board of Georgia (ADACBGA) has designed a credentialing system that will evaluate each applicant's competency and grant recognition to those professionals who meet the specified minimum standards. In creating this process, the ADACBGA examined credentialing systems of other states, gathered input from state and national groups, and incorporated the most appropriate elements to form the basis of this system. The ADACBGA recognizes that Certified Gambling Addiction Counselors work in a wide range of disciplines and have diverse educational and experiential backgrounds. The ADACBGA's certification process identifies and defines the core functions, responsibilities, knowledge, and skill areas required of Certified Gambling Addiction Counselors regardless of work setting, approach, and educational or professional training. This process does not endorse any one particular philosophy, treatment modality or service delivery approach. The ADACBGA encourages and requires the development of professional skills and competencies for all Certified Gambling Addiction Counselors. Purpose

The purpose of a certification system for Certified Gambling Addiction Counselor is to:

1. Assure the public a minimum level of competency for quality services by Certified Gambling Addiction Counselors.
2. Give professional recognition to qualified Certified Gambling Addiction Counselors through a process that examines demonstrated work competencies.
3. Assure an opportunity for ongoing professional development for Certified Gambling Addiction Counselors.
4. Promote professional and ethical practice by enforcing adherence to a Code of Ethics.

#### Definition of a Certified Gambling Addiction Counselor (CGAC)

A Certified Gambling Addiction Counselor is often the primary person providing direct care to persons receiving problem gambling services and their families. The role of the Gambling Addiction Counselor includes but is not limited to:

- \* Applying theories of addiction in assessment and treatment practices.
- \* Performing a comprehensive assessment with an orientation towards gambling.
- \* Providing gambling specific counseling, including developing treatment plans and conducting case management activities.
- \* Recognizing and responding to indicators of suicidal ideations and self-harm behaviors.
- \* Working in a professional and ethical manner.

The CGAC certification is valid for two (2) years from the issue date. In order to maintain your certification you must document a total of 40 hours of continuing education in the two year period, ten (10) hours specific to gambling addiction, and five (5) hours of which must be in professional ethics and submit a recertification fee of \$150.

Once a certification's expiration date has been reached, recertification packets postmarked past that date will be assessed a \$35 late fee for reinstatement. Each month past the due date an additional \$10 will be assessed for reinstatement. Continuing education requirements of 20 contact hours per year must be documented.

If, after all attempts to contact the certificant have failed, portfolios will be discarded once the certificate has expired for 3 years. A new application must be submitted and testing taken again. All prior fees paid will be forfeited.

#### FEE SCHEDULE:

|                      |          |
|----------------------|----------|
| APPLICATION FEE:     | \$150.00 |
| EXAM FEE:            | \$180.00 |
| RECERTIFICATION FEE: | \$150.00 |

## CHECKLIST FOR APPLICATION

1. Send completed pages 6-11 to ADACBGA.
2. Include check or money order for \$150 payable to ADACBGA. Online payments are accepted on our website under the "Payment" tab. Application fees are non-refundable and are forfeited if an applicant's file is closed.
3. Attach copies of certificates of attendance, in-service reports, and/or other verification of education hours to pages, numbering the certificates and listing them on the page. Do not send originals.
4. Arrange for official college/university transcripts to be sent to ADACBGA.
5. Have supervisor send complete and return pages 12-16. Supervision forms are not to be given back to applicant unless placed in a sealed envelope with the evaluator's signature across the back seal.
7. SEND MATERIALS REGULAR MAIL ONLY! Staff may not be available to sign, and your materials may be returned. Regular mail is most reliable.
8. Education hours are defined as 50 continuous minutes spent in a formal classroom type of setting (College/University, workshop, seminar). COLLEGE/UNIVERSITY
  - EDUCATION: Semester Hours x 15 = Contact hours; Quarter Hours x 10 = Contact Hours.
  - OTHER EDUCATION: CEU's x 10 = contact hours Actual hours spent in workshop or seminar = contact hours.
  - Inservices, etc. at the workplace will count if related to the core functions of addiction counseling.

The following certification standards are the minimum requirements that must be documented in order to earn the Gambling Addiction Counselor certification.

| <b>CGAC Standards – For the Non-certified Candidate</b> |  |
|---|--|
| <b>Credential</b>                                       | Must hold the minimum of a bachelor’s degree.  |
| <b>Experience</b>                                       | 4,000 hours of problem gambling specific experience  |
| <b>Training</b>   | A total of 300 hours of training divided among the performance domains:<br><br><b>Minimums in each area:</b> <ul style="list-style-type: none"> <li>• Addiction Theories - 10 hours</li> <li>• Basic Knowledge of Problem and Pathological Gambling - 16 hours</li> <li>• Gambling Counseling Practice - 20 hours</li> <li>• Special Issues in Gambling - 24 hours</li> <li>• Ethics – 12 hours</li> </ul> |
| <b>Supervision</b>                                      | 200 hours of direct supervision  |
| <b>Evaluations</b>                                      | At least one of which must be from a current or former supervisor  |
| <b>Code of Ethics</b>                                   | must sign statement agreeing to follow the ADACBGA’s Code of Ethics  |
| <b>Written exam</b>                                     | Gambling Addiction Counselor Exam  |
| <b>Renewal</b>  | 40 CES Biannually; 10 CEs specific to gambling.  |

The following certification standards are the minimum requirements that must be documented in order to earn the Gambling Addiction Counselor certification.

| <b>CGAC Standards for a candidate who already holds the CADC I, CADC II, CAADC, CCJP or CCDP-D</b> |  |
|--|--|
| <b>Credential</b>  | Applicant must hold a current certification through ADACBGA.   |
| <b>Experience</b>  | 1,000 hours of problem gambling specific experience  |
| <b>Training</b>  | A total of 60 hours of training divided among the performance domains: <ul style="list-style-type: none"> <li>• Basic Knowledge of Problem and Pathological Gambling - 16 hours</li> <li>• Gambling Counseling Practice - 20 hours</li> <li>• Special Issues in Gambling - 24 hours</li> </ul> |
| <b>Supervision</b>   | 50 hours of direct supervision specific to gambling addiction  |
| <b>Code of Ethics</b>  | Must sign statement agreeing to follow the ADACBGA's Code of Ethics  |
| <b>Written Exam</b>  | Gambling Addiction Counselor Exam  |
| <b>Renewal</b>   | 40 CES Biannually; 10 CEs specific to gambling.  |



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ADACBGA.org info@adacbga.org

## Certified Gambling Addiction Counselor (CGAC) APPLICATION & BIOGRAPHICAL DATA

Please type or print legibly:

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

Previous or other name(s) used: \_\_\_\_\_

Home address: \_\_\_\_\_

\_\_\_\_\_  
City State Zip County

Work address: \_\_\_\_\_

\_\_\_\_\_  
City State Zip County

Preferred Phone: (\_\_\_\_)-\_\_\_\_\_ Work (\_\_\_\_)-\_\_\_\_\_ E-mail address: \_\_\_\_\_

\*As a courtesy to certified counselors we will list your county or employment, work phone number and email in a searchable database on our website. Would you like this information listed for public viewing? Yes \_\_\_ No \_\_\_

To keep you better informed about ADACBGA, we automatically include you in our electronic mailing list. If you do not wish to receive news and updates you will be asked to opt out. If you would like to unsubscribe, please check here. \_\_\_ Unsubscribe

Date of Birth: \_\_\_\_\_ Last four numbers of Social Security no. XXX-XX-\_\_\_\_\_

Gender: \_\_\_\_\_ Ethnic Affiliation: \_\_\_\_\_ (For statistical purposes only)

Highest Education level completed: High School or GED\_\_\_ Associate \_\_\_ Bachelors\_\_\_ Masters\_\_\_ Doctorate\_\_\_

List any other boards by which you are certified or licensed: \_\_\_\_\_

Has certification or license been denied or revoked by any other board: No \_\_\_ Yes \_\_\_

If yes, please explain on a separate sheet.

**ASSURANCE AND RELEASE**

**ETHICS STATEMENT**

**(Please Initial Where Requested as Indication You Have Read and Understand Each Section)**

\_\_\_\_\_(Initial) I hereby attest that all the information given herein is true and complete to the best of my knowledge and belief. I understand that falsification of any portion of this application will result in my being denied certification, or revocation of same, upon discovery

\_\_\_\_\_(Initial) I have read, understand, and agree to act in accordance with the code of ethics recognized by my profession and in compliance with any and all codes of professional conduct in effect in the State of Georgia.

\_\_\_\_\_(Initial) I acknowledge the right of ADACBGA to verify the information in this application or to seek further information from employers, schools or persons mentioned herein.

\_\_\_\_\_(Initial) I further understand that that it is my responsibility to maintain my certification by renewing prior to my expiration date. I understand that it is an ethical violation to provider services if my certification has expired.

\_\_\_\_\_(Initial) I agree to have my current valid certificate from ADACBGA on display or easily accessible is I am treating clients.

\_\_\_\_\_(Initial) I will hold ADACBGA, its Board members, officers, agents, and staff free from any civil liability for damages or complaints by reason of any action that is within the scope and arising out of the performance of their duties which they, or any of them, may take in connection with this application, the attendant examination, the grades with respect to any examination, and/or failure of the Board to bestow upon me certification as an Alcohol and Drug Abuse Counselor.

\_\_\_\_\_(Initial) I further understand that ADACBGA will post on our website and provide to IC&RC my contact information for their data base, along with my certification number, level, expiration date and original certification date.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Printed name

\*Remember to include your fee of \$150 or make an online payment with a credit card under the "Payment" page of our website.

# Certified Gambling Addiction Counselor Code of Ethics\*

\*Directly based upon the Code of Ethics as stated by the International Gambling Counselor Certification Board

Applicant's Name (please print or type): \_\_\_\_\_

Principle 1: Non-Discrimination - The ADACBGA values diversity. I, as an CGAC, will not discriminate against clients or professionals based on racial or ethnic background, religion/spiritual beliefs, age, gender, sexual orientation, marital status, political beliefs, treatment history, criminal justice history/status, or mental/physical disability and other cultural identities that are important to the client and I will: Avoid bringing personal or professional issues into the counseling relationship and guard the individual rights and personal dignity of clients through an awareness of the impact of stereotyping and discrimination. Strive to treat all individuals with impartiality and objectivity based solely on their personal merits and mindful of the dignity of all human persons. As such, I shall not impose my personal values on my clients. Relate to all clients with empathy and understanding no matter what their diagnosis or personal history and with acceptance and openness regardless of treatment history or criminal justice status or background. Respect the right of others to hold opinions, beliefs, and values different from my own.

Principle 2: Responsibility - The ADACBGA espouses objectivity and integrity. I, as an CGAC, will maintain the highest standards of service and I will:

Assist in educating and helping others acquire knowledge and skills in dealing with disordered gambling. Accept the obligation, when supervising others, to facilitate professional development of these individuals by providing accurate and current information, timely evaluations, and constructive consultation. Understand that most property in the healing professions is intellectual property and shall not present the ideas or formulations of others as if they were my own. Rather, I shall give appropriate credit to their originators both in written and spoken communication. Regard the use of any copyrighted material without permission or the payment of royalty to be theft. Maintain respect for institutional policies and management functions of agencies and institutions within which the services are being performed, but will take initiative toward improving such policies when it will better serve the interest of the client.

Principle 3: Competence - The ADACBGA recognizes that the profession is founded on national standards of competency which promote the best interests of society, the client, the counselor and of the profession as a whole. I, as an CGAC, will recognize the need for ongoing education as a component of professional competency and I will: Recognize boundaries and limitations of competencies and not offer services or use techniques outside of my professional competencies and scope. Maintain competence in the area of my practice through continuing education, constantly improving my knowledge and skills in those approaches most effective with my specific clients. Recognize the effect of impairment on professional performance and be willing to seek appropriate treatment for myself or for a colleague. I shall support peer assistance programs in this respect.



Principle 4: Legal and Moral Standards - The ADACBGA upholds the legal and accepted moral codes which pertain to professional conduct; I, as an CGAC, will be aware of and follow those laws and regulations that are relevant both personally and professionally and I will:

Make every attempt to be fully cognizant of all federal and state laws that pertain to the practice of counseling disordered gamblers and their families. Not claim either directly or by implication, professional qualifications or affiliations that I do not possess. Understand that the determination of a law or regulation is unjust, is not a matter of preference or opinion but a matter of rational investigation, deliberation, and dispute. Understand that justice extends beyond individual relationships to the community and society; therefore, I shall participate in activities that promote the health and well-being of my community and profession. Principle 5: Client Welfare - The ADACBGA understands that the primary professional responsibility and loyalty is to the welfare of the client. I, as an CGAC will hold, as a primary guide, the client's best interests with regard to public health, safety, and welfare and I will: Take all measures to safeguard the privacy and confidentiality of client information within the limitations of legally mandated reporting requirements and except where the client has given specific, written, informed and limited consent. Terminate counseling and consulting relationship when it is reasonably clear to the counselor that the client is not benefiting from the relationship. Take care to provide services in an environment which will ensure the privacy and safety of the client at all times and ensures the appropriateness of service delivery and discloses the code of ethics, professional loyalties, and responsibilities to all clients. Hold the welfare of the client paramount when making any decisions or recommendations concerning referral, treatment procedures or termination of treatment. Facilitate clients' self-efficacy; by encouraging them to act according to their capabilities. Avoid doing for others what they can readily do for themselves. Likewise, I shall not insist on doing what I perceive as good without reference to what the client perceives as good and necessary.

Principle 6: Client Relationship - The ADACBGA values the integrity of the counseling relationship and respects the fundamental human right of all individuals to self-determination and to make decisions that they consider in their own best interest. I, as an CGAC will be open and clear about the nature, extent, probable effectiveness, and cost of those services to allow each individual to make an informed decision of their care and I will: Inform the client and obtain the client's agreement in areas likely to affect the client's participation, including the recording of an interview, the use of interview material for training purposes, and/or observation of an interview by another person. Not engage in professional relationships or commitments that conflict with family members, friends, close associates, or others whose welfare might be jeopardized by such a dual relationship. Not exploit relationships with current or former clients for personal gain, including social or business relationships. Not, under any circumstances, engage in sexual behavior with current or former clients and not accept as a client anyone with whom I have engaged in sexual behavior. Because a relationship begins with a power differential, I shall not exploit relationships with current or former clients for personal gain, including social or business relationships. Not accept substantial gifts from clients, other treatment organizations, or the providers of materials or services used in my practice.

Principle 7: Confidentiality - The ADACBGA embraces the duty of protecting the client's rights under confidentiality. I, as an CGAC, will not disclose confidential information acquired in teaching, practice, or investigation without appropriately executed consent and I will: Provide the client their rights regarding confidentiality, in writing, as part of informing the client in any areas likely to affect the client's confidentiality. This includes the recording of the clinical interview, the use of material for insurance purposes, and the use of material for training or observation by another party. Make appropriate provisions for the maintenance of confidentiality and the ultimate disposition of confidential records. I shall ensure that the data obtained is necessary and appropriate to services being provided and secured by the available security methodology. Adhere to all federal and state laws regarding confidentiality and the counselor's responsibility to lawfully report information in specific circumstances to the appropriate authorities. Understand that the right of confidentiality cannot always be upheld if it serves to protect abuse, neglect, or exploitation of any person or leaves another at risk of bodily harm. Use clinical and other material in teaching and/or writing only when there is no identifying information about the parties involved.

Principle 8: Remuneration - The ADACBGA supports financial arrangements in professional practice that are in accord with standards that safeguard the best interests of the client, of the counselor and of the profession. I, as an CGAC, will: Carefully consider the ability of the client to meet the financial cost in establishing rates for professional services. Not send or receive any commission or rebate or any other form of remuneration for referral of clients for professional services nor will I engage in fee splitting. Not use my personal relationship with clients to promote personal gain or profit of my agency or commercial enterprise of any kind.

Principle 9: Preventing Harm - The ADACBGA understands that every decision and action has an ethical implication leading either to benefit or harm. I, as an CGAC, will carefully consider whether any decisions or actions has the potential to produce harm of a physical, psychological, financial, legal, or spiritual nature before implementing them and I will: Refrain from using any methods that could be considered coercive such as threats, negative labeling, and attempts to provoke shame or humiliation. Make no requests of clients that are not necessary as part of the agreed treatment plan. Terminate the counseling or consulting relationship when it is reasonably clear that the client is not benefiting from the relationship./treatment. Understand an obligation to protect individuals, institutions, and the profession from harm that might be done by the unethical behavior of others. Consequently, I am aware of the appropriate process for resolving concerns about the potentially unethical or harmful behavior another individual, institution or agency informally through bringing the concern to the attention of the individual, institution or agency or through formal processes such as reporting to appropriate committees on professional ethics, licensing or credentialing boards or institutional authorities (so long as reporting does not violate any issues of confidentiality).

Principle 10: Societal Obligations - The ADACBGA advocates for changes in public policy and legislation to afford opportunity and choice for all persons whose lives are impaired by pathological gambling and I, as an CGAC, will: Actively engage, to the best of my ability, in the legislative processes, educational institutions, and the general public to change public policy and legislation to make possible opportunities and choice of service for all human beings of any ethnic or social background whose lives are impaired by problem and disordered gambling.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Return forms DIRECTLY to: ADACBGA, PO Box 250449, Atlanta, GA 30325



**Please do not return this form to the applicant unless it is placed in a sealed envelope with the evaluator's signature across the back seal.**

**SUPERVISED PRACTICAL EXPERIENCE**

APPLICANT'S NAME \_\_\_\_\_

SUPERVISOR/ TITLE \_\_\_\_\_

PROFESSIONAL LICENSES AND/OR CERTIFICATES YOU HOLD \_\_\_\_\_

AGENCY \_\_\_\_\_ PHONE \_\_\_\_\_

How long have you supervised this applicant?

From (m/y) \_\_\_\_\_ to (m/y) \_\_\_\_\_

**Purpose:** The supervised practical experience is to document that the candidate has received supervision directly relating to the CGAC domains. Methods of supervision that will be accepted include activities designed to provide training of specific recovery coach functions. These activities are monitored by supervisory personnel who provide timely positive and negative feedback to assist the counselor in this learning process. Methods of such supervision could be joining sessions and later reviewing them, case presentations, group or individual staffings, teaching about various methods, etc.

**Supervised Practical Experience Requirements:**

- **Uncertified Candidates must complete 200 hours face-to-face supervision.**
- **Candidates already certified through ADACBGA must complete 50 hours face-to-face supervision.**

| Performance Domain  | # of Hours* |
|---|-------------|
| Addiction Theories – Clinical supervision in addiction theories includes feedback and discussion regarding the disease of addiction, models of treatment, signs and symptoms of addiction and/or addiction treatment modalities.  |             |
| Basic Knowledge of Problem and Pathological Gambling – Clinical supervision in this domain refers to feedback and discussion regarding the definition of pathological gambling; the scope/prevalence of gambling addiction in adults, youth and other treatment populations; the typical progression and withdrawal symptoms of a gambling addiction; and standards evaluation instruments used to identify a potential or actual gambling addiction. |             |
| Gambling Counseling Practice – Clinical supervision in the area of gambling counseling refers to feedback and discussion regarding treatment plans, including treatment approaches; treatment implementation and monitoring; and continuing care.   |             |
| Special Issues in Gambling – Clinical supervision in this domain is focused on ensuring that gambling counselors understand specific issues that present when planning for relapse/ relapse prevention; and recognizing and responding to indicators of high risk, including suicide, self-harm, risk management, crisis management, and financial issues.  |             |

|   |  |
|---|--|
| Professional Issues – Clinical supervision related to professional issues includes discussions and feedback on issues such as cultural competence, boundaries/transference, privacy/confidentiality/HIPAA, and professional ethics. |  |
| Total Hours*  |  |

\*must have a minimum of 10 hours of clinical supervision in each performance domain

*"I hereby certify that I have been in a position to observe and have first hand knowledge of*

\_\_\_\_\_

(Name of Applicant)

*"By my signature I acknowledge that, to the best of my knowledge, the above material is true."*

\_\_\_\_\_

Supervisor's Signature

\_\_\_\_\_

Date

\*Supervisor must also fill out an evaluation form.

The Alcohol and Drug Abuse Certification Board of Georgia reserves the right to request further information from you concerning this applicant. PLEASE RETURN THIS FORM DIRECTLY TO:

ALCOHOL AND DRUG ABUSE CERTIFICATION BOARD OF GEORGIA  
PO Box 250449, Atlanta, GA 30325

**Please do not return this form to the applicant unless it is placed in a sealed envelope with the supervisor's signature across the back seal.**

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**SUPERVISOR EVALUATION**

(PG. 1 of 2)

APPLICANT'S NAME \_\_\_\_\_

SUPERVISOR'S NAME \_\_\_\_\_

PLEASE USE THE FOLLOWING RATING SCALE TO EVALUATE THE APPLICANT'S SKILLS IN THE AREAS REQUESTED:

- NA = NOT APPLICABLE
- 1 = POOR
- 2 = FAIR
- 3 = AVERAGE
- 4 = ABOVE AVERAGE
- 5 = EXCELLENT

The items below represent skills needed by addictions counselors in the core functions. Please evaluate the applicant's abilities in each area. Acceptable scores are fair (2) or above.

| Score | Function  |
|-------|---|
|       | Screening - the process by which a client is determined appropriate and eligible for admission to a particular program.   |
|       | Intake - The administrative and initial assessment procedures for admission to a program  |
|       | Orientation - describing to the client the general nature and goals of the program, rules governing client conduct and infractions that can lead to disciplinary action or discharge from the program, the hours and times services are available, treatment costs to be borne by the client if any, and client rights. |
|       | Assessment - those procedures by which a counselor identifies and evaluates an individual's strengths, weaknesses, problems, and needs for the development of the treatment plan.   |
|       | Treatment Planning - the process by which the counselor and the client identify and rank problems needing resolution, establish agreed upon immediate and long term goals, decide on a treatment process and the resources to be utilized.  |
|       | Individual Counseling - a one-to-one counselor-client process for the purpose of assessing a client's problems and facilitating appropriate changes.  |
|       | Group Counseling - A process involving several clients for the purpose of jointly exploring the client's problems and facilitating appropriate changes.   |
|       | Family Counseling - A process of exploring the dynamics of the family system and facilitating appropriate changes.  |
|       | Case Management – Activities which bring services, agencies, resources or people together within a planned framework of action toward the achievement of established goals. It may involve liaison activities and collateral contacts.  |
|       | Crisis Intervention - those services which respond to an alcohol and/or other drug abuser's needs during acute emotional and/or physical distress.  |

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

|  |   |
|--|---|
|  | Client Education – Provision of information to individuals and groups concerning alcohol and other drug abuse and the available services and resources.                                 |
|  | Referral - Identifying the needs of the client that cannot be met by the counselor or agency and assisting the client to utilize the support systems and community resources available. |
|  | Reports and Record Keeping - charting the results of the assessment and treatment plan, writing reports, progress notes, discharge summaries and other client-related data.             |
|  | Consultation - relating with counselors and other professionals in regard to client treatment and services to assure comprehensive, quality care for the client.                        |

Using the same scale, please evaluate the applicant on the following areas of interpersonal relationships with clients, based on your observations:

| Score | Relationship Areas                         |
|-------|--|
|       | Respect for the client                     |
|       | Care and concern for the client            |
|       | Genuineness with the client                |
|       | Empathy with the client                    |
|       | Flexibility with the client                |
|       | Judgment with the client                   |
|       | Spontaneity with the client                |
|       | Capacity for confrontation with the client |
|       | Capacity for appropriate self-disclosure   |
|       | Sense of immediacy                         |
|       | Concreteness                               |
|       | Ability to set appropriate boundaries      |

***PLEASE RETURN DIRECTLY TO:***  
**Alcohol and Drug Abuse Certification Board of Georgia, Inc.**  
**6755 Peachtree Industrial Blvd. #110**  
**Atlanta, GA 30360**

**Do not return this form to the applicant,**  
**unless it has been placed in a sealed envelope with your signature across the back seal!**

**SUPERVISOR'S STATEMENT**

Applicant's name \_\_\_\_\_

Supervisor's name \_\_\_\_\_

Program name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

How long have you supervised this applicant?

From (m/y) \_\_\_\_\_ to (m/y) \_\_\_\_\_

Number of Face-to-Face supervision hours: \_\_\_\_\_

Number of clients candidate supervises \_\_\_\_\_

\_\_\_\_\_  
*Please add any comments on an additional sheet of paper.*

I HEREBY CERTIFY THAT I HAVE OBSERVED AND HAVE FIRSTHAND KNOWLEDGE OF THIS APPLICANT'S WORK AND THAT THE ABOVE INFORMATION IS, TO THE BEST OF MY KNOWLEDGE, TRUE

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

***PLEASE RETURN DIRECTLY TO:***  
**Alcohol and Drug Abuse Certification Board of Georgia, Inc.**  
**PO Box 250449**  
**Atlanta, GA 30325**

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## ALCOHOL AND DRUG ABUSE CERTIFICATION

### BOARD OF GEORGIA, INC.

#### MISSION:

The Alcohol and Drug Abuse Certification Board of Georgia, Inc., is an independent, non-governmental and non-profit body.

This Board was formed in 1992 to offer certification to Alcohol and Drug Abuse Counselors and to supervisors in alcohol and drug counseling and is based on the standards and methods offered by the International Certification and Reciprocity Consortium/Alcohol and Other Drug Abuse, a multi-state and nation body organized to promote uniform professional standards and quality for the substance abuse counseling profession and to give the profession greater visibility in the U.S. and abroad. As a result of membership in IC&RC/AODA, our certified counselors may relocate to other states, the military services and other countries, and transfer their certification with a minimum of effort and expense.

Our goal is to provide competency-based certification that will assure quality care for those affected by sub-stance abuse. Certification is a voluntary process whereby professionals with a special interest in providing treatment to substance abusers and their families may receive recognition for their competency. The purpose is to establish professional standards which enable counselors, allied health professionals, health service providers, third party payors, employers, and the general public to recognize qualified professionals in this field. Certification offers evidence that standards of knowledge, skill, experience, and demonstration of competency have been met.

## INFORMATION FOR THE CANDIDATE:

This manual describes and outlines the requirements for certification for professionals desiring certification as a Certified Recovery Residence Administrator (CGAC) from the Alcohol and Drug Abuse Certification Board of Georgia, Inc.

### 10 Principles of Recovery

- ***Recovery emerges from hope:*** The belief that recovery is real provides the essential and motivating message of a better future – that people can and do overcome the internal and external challenges, barriers, and obstacles that confront them.
- ***Recovery is person-driven:*** Self-determination and self-direction are the foundations for recovery as individuals define their own life goals and design their unique path(s) towards those goals.
- ***Recovery occurs via many pathways:*** Individuals are unique with distinct needs, strengths, preferences, goals, culture, and backgrounds including trauma experiences that affect and determine their pathway(s) to recovery.
- ***Recovery is holistic:*** Recovery encompasses an individual’s whole life, including mind, body, spirit, and community.
- ***Recovery is supported by peers and allies:*** Mutual support and mutual aid groups, including the sharing of experiential knowledge and skills, as well as social learning, play an invaluable role in recovery.
- ***Recovery is supported through relationship and social networks:*** An important factor in the recovery process is the presence and involvement of people who believe in the person’s ability to recover; who offer hope, support, and encouragement; and who also suggest strategies and resources for change.
- ***Recovery is culturally-based and influenced:*** Culture and cultural background in all of its diverse representations including values, traditions, and beliefs are keys in determining a person’s journey and unique pathway to recovery.
- ***Recovery is supported by addressing trauma:*** The experience of trauma (such as physical or sexual abuse, domestic violence, war, disaster, and others) is often a precursor to or associated with alcohol and drug use, mental health problems, and related issues.
- ***Recovery involves individual, family, and community strengths and responsibility:*** Individuals, families, and communities have strengths and resources that serve as a foundation for recovery.
- ***Recovery is based on respect:*** Community, systems, and societal acceptance and appreciation for people affected by mental health and substance use problems. (SAMSHA, 2011)