

Dear tCADC Applicant:

Thank you for your interest in temporary counselor certification through the Iowa Board of Certification (IBC). IBC exists to enhance the quality of substance abuse services in Iowa by certifying alcohol and drug counselors in the State of Iowa, and you are to be commended for your commitment to the field by seeking certification.

You are allowed one year to complete your application, starting from the date that any portion of this application is received in the IBC office; this includes completing all of the attached forms, meeting education requirements, and payment of fees. Once your application is complete, you will be notified that you are being pre-registered for the exam; you will then have one year to pass the exam. ***If you're not able to meet either of these timeframes, you will need to complete a new application and submit new non-refundable fees.***

To efficiently move through the application process, you need to follow these steps:

- **Read this letter thoroughly**
- Review the Counselor Handbook (available on the website at www.iowabc.org) so that you are familiar with applicable requirements, processes and IBC's Code of Ethics. By signing your application on Form 02, you are subscribing to IBC's Code of Ethics.
- Order transcripts from any college/university you've attended; transcripts need to be sent directly from the school to our office via U.S. Mail (student-issued or faxed/emailed transcripts will not be accepted or reviewed)
- **COMPLETE THE ATTACHED APPLICATION ON YOUR COMPUTER, save it, then print (must be printed one-sided only – we will not review applications that have been printed 2-sided) and mail the application with original signatures, copies of your certificates of completion, and fee (if paying by check) to the IBC office. You may also pay with Dwolla and can find the link on our home page. ALWAYS SAVE A COPY OF YOUR COMPLETED APPLICATION ON YOUR COMPUTER. Be sure your completed application includes:
 - Completed and signed/dated Forms 01, 02, 03, 04
 - Copies of certificates of completion (do not send originals)
 - Original transcripts from colleges attended, sent directly to IBC via U.S. Mail
 - The **non-refundable** fee of \$380.00 which includes the application review, one test fee and the first two years of certification (please note that the exam is only offered via computer). This fee can be paid with a personal check, paid in cash at the IBC office or you may pay on our website's home page through Dwolla.**

Once we receive your application, we will review it and let you know that:

1. More items are still needed, or
2. It is complete and you're eligible to test.

Study guides are available from our office for \$185.00. To request a guide, complete the study guide order form found in this application packet or on the IBC website (under "Downloads") and email/mail it to our office with the appropriate fee.

A practice exam is now available and may be paid for via IC&RC's website at www.internationalcredentialing.org: click on "Are You A Professional," then on "Exam" and then on "Prep." The cost of this practice exam is \$49.00 and is paid directly to IC&RC.

Exam scores are pulled weekly. Once we receive your passing exam score, your certificate will be emailed to you and you may then begin using your credential's initials according to the validation dates shown on your certificate.

Your tCADC certification is valid for two years only and there is no recertification for this credential. Before your tCADC expires, you will need to upgrade to either the CADC or IADC by completing the "CADC Upgrade Application" or the "IADC Upgrade Application" (found on the IBC website), and submitting it with the \$40.00 application review fee. IBC will prorate what you've already paid for your 2-year tCADC certification and apply this toward your CADC/IADC certification. You will **not** have to re-test.

Please note that IBC sends out newsletters three times/year via email to keep you informed of information relevant to your certification; newsletters and notifications can also be found on the IBC website. **Be sure that you are able to receive emails from us, and notify the IBC office if your email changes.** You also need to contact the IBC office if your name, address, phone or work information changes so that our databases are up to date.

To stay current with certification information, go the IBC website to like us on Facebook and follow us on Instagram. You can also opt in for text messages by texting EZTJJ83742 to 797979.

We understand that the certification process can seem a bit daunting, so feel free to call our office at any time with questions.

Congratulations on taking the first step toward certification!

Sincerely,

Debbie Gilbert

Debbie Gilbert
Executive Director



Temporary Certified Alcohol & Drug Counselor (tCADC)
Form 01: Applicant Information

Name (as you wish to have it on your certificate) _____

Other last names you have used: _____

Home Address _____

City, State, Zip Code _____

Telephone Number _____ Cell _____

E-mail _____ Note: IBC will occasionally send text message to your cell phone with relevant news. Check here if you do not wish to receive text messages from IBC: _____. You may also text EZTJJ83742 to 797979 to opt in for texting.

Current Place of Employment _____

Address _____

City, State, Zip Code _____

Telephone Number _____ Job Title _____

E-Mail _____ (Note: IBC newsletters are sent out 3 times/year via email and all certified professionals will be held responsible for information contained in these newsletters. **Be sure to contact the IBC office if your email information changes**).

List any professional certificates or licenses you presently hold and the states in which they are valid.

Have you ever had any credential (i.e. license, certification, endorsement, etc.) revoked, suspended or sanctioned? Yes ____ No ____ (If so, indicate on back of this page or on a separate page what credential, when, where, for what reason, and the current status of that credential)

IBC reserves the right to request further information from employers, organizations, and persons who may have pertinent information regarding this application.

The \$380.00 non-refundable fee is due with this application (includes application review, exam fee and 2-year certification fee).

Please check one: I am paying by: Check ___ Cash ___ Online via Dwolla ___

Applicant Name _____

Form 02-tCADC: ASSURANCES AND RELEASES

Note: Sign and date this form just prior to sending your completed application to IBC.

I give permission for the Iowa Board of Certification (IBC), its committees, and staff to investigate my background as it relates to statements contained in this application for counselor certification. I give my permission to IBC to communicate with my employer(s) regarding the contents and status of my application.

I understand that false or misleading statements or omissions may result in the denial or revocation of certification as these actions are a violation of the IBC Code of Ethics for Alcohol and Drug Counselors.

I consent to the release of information contained in my application file and any other pertinent data submitted to or collected by IBC to its officers, committee members, and staff.

I certify that I have read this entire application and that all the material contained herein is my own work, and is true and complete.

I certify that I have read and am subscribing to the IBC Code of Ethics for Alcohol and Drug Counselors, and understand that by signing this form I agree to report any potential code violations by myself or others, and I agree to cooperate in any ethics investigation I may be a part of.

I give my permission to IBC, its committees, or representatives to contact or question, as necessary, any person, institution or organization for any ethics or appeal investigation.

I certify that I have not had a professional license/certification/professional credential denied revoked or suspended, nor have I been sanctioned or disciplined by this or any other certifying or licensing professional board of authority, public or private. If any of these events have occurred prior to signing this form, I have self-reported that information, in writing, with this application.

I further agree to hold IBC, its officers, Board members past and present, employees, representatives and examiners free from any civil liability for damages or complaints by reason of any action that is within the scope of the performance of their duties which they may take in connection with this application and subsequent examinations and/or the failure of IBC to issue certification.

Signature

Date

Applicant Name _____

Form 03-tCADC: EDUCATION RESUME

INSTRUCTIONS:

1. List below all formal educational programs. Do NOT include workshops attended.
2. Supply an official copy of your college transcripts. ***We will only review transcripts that are sent directly from the institution to the Iowa Board of Certification via U.S. Mail.***
3. To help us locate your transcripts when they arrive, please list any other last names you used when attending school: _____

High School attended _____

City _____ State _____

H.S. Diploma/GED ____ Yes ____ No

Colleges/Universities attended:

Institution	Major	Degree	Date Completed

Applicant Name _____

Form 04: Verification of Counselor Professional Development

List your trainings below, indicating the number of hours for each training in the applicable category. IBC may count your trainings in a different category than you do. You must submit a **COPY** of your certificate of completion for each training listed below – do not send your original certificate. Make additional copies of this form as needed. **DO NOT LIST COLLEGE COURSEWORK ON THIS FORM.** Definitions of the categories are provided on pages 34-36 of the Counselor Handbook.

Date of training	Title of Training	Counseling Theories & Techniques	Alcohol & Drug Specific	Special Pops	Racial/Ethnic	Ethics	Other

(FOR OFFICE USE ONLY)

Total # of clock hours approved: CTT_____ AD_____ SP_____ R/E_____ E_____ O_____



IBC STUDY GUIDE ORDER FORM

Note: IBC and IC&RC do not endorse any particular study guides or organizations writing study guides. At this time, the following study guides are available for purchase through the IBC office.

Please send me the following study guide(s):

_____ **Getting Ready to Test: A Review and Preparation Manual for Drug and Alcohol Credentialing Exams – 8th Edition** (for tCAD/CADC/IADC/IAADC applicants) **\$185.00**
 786 pages – This unique self-guided manual reflects updates made on the exam beginning the first part of 2015, and provides the most comprehensive set of materials designed to help refresh and enhance your knowledge on many of the major areas of information required for the exam. It includes 150 sample exam questions designed to make you feel more comfortable with the exam. This manual has been updated to reflect recent federal studies as well as CDC updates to the latest HIV/AIDS info. This guide also contains a new chapter on DSM-5 information that will be included in the exam.

_____ **Prevention Specialists:** There is now a FREE study guide available on the IBC website under the “Certification/Recertification” tab, then click on “CPS” and then “Preparing For and Passing the IC&RC Prevention Specialist Exam.” **FREE**

Name _____
 Address _____

 Phone _____ Email _____

I am paying by: Check _____ Cash _____ Dwolla _____

Note: *Guides will be mailed when payment is received.* Fee may be paid by check, cash or via Dwolla on the IBC website. All prices include shipping & handling. Guides will be mailed within 3 business days of receipt of this order form.

Email this order form to info@iowabc.org, fax it to 515-965-5540 or mail it to the IBC office at 225 NW School St, Ankeny, IA – 50023.



Iowa Board
of Certification

FEES FOR tCADC

Application Review, test fee, 2 years certification (<u>non-refundable</u>)	\$380.00
Returned Check Fee	\$ 35.00
Test Fee (if repeating the exam more than once)	\$140.00
Written Test Study Guide	\$185.00
Practice Exam (paid directly to IC&RC) (www.internationalcredentialing.org)	\$ 49.00