

Application to the Basics in Addiction Counseling (BAC) Program

Section I.
Application Requirements & Procedures

Requirements:

All applicants are required to be Psychology Majors and have:

- Enrolled in the equivalent of the 4th semester of full-time coursework
- Cumulative GPA of 3.0; or a Psychology GPA of 3.5
- A commitment to a career in the alcohol/drug counseling field
- Interpersonal skills appropriate for a counseling career
- The ability to meet the program standards (with or without reasonable accommodation), and
- Read and acknowledged understanding of the New Mexico Counseling and Therapy Practice Board standards for licensure (<http://www.rld.state.nm.us/Counseling/index.html>)

Procedures:

Interested applicants must provide:

- BAC Application
- Letter of interest (1-2 pages in length)
- 2 letters of recommendation that address the qualifications, character, and motivation of the applicant; may include employers, professors, supervisors (please no personal references)
- Current LOBO Trax report and advisement (unofficial) transcript from UNM
- Current resume that includes all education, work and volunteer experience

All applications will be reviewed by an admissions committee.

Selected applicants will be interviewed.

Email:

Banner ID:

Emergency
Contact:

(Name and relation)

Phone number:

B. Educational and Career Goals

Please describe your long-term educational goals:

Please describe your short and long-term career goals:

What is your planned graduation date?

C. Education/Experience

1. Degrees Earned:

College/ University	Dates from/to	Field of Study	Degree	Did you graduate?

2. Have you received, or do you expect to receive any grade below a C in required psychology course?

- Yes
 No

If yes, please explain below:

3. Continuing Education: *(List continuing education courses completed)*

Course	Dates from/to	Name of Place Taken
Example:		
The Meaning of Life	2/10 - 4/10	UNM Continuing Education

4. Skills (List any other skills, including language skills relevant to counseling and therapy practice):

Section III.
Information on Mental Health and Substance Abuse

Addiction counselors are often in stressful and psychologically demanding situations. The profession often requires counselors to make immediate and serious decisions under crisis conditions. If you are concerned about the impact of the addictions counseling work on your emotional or psychological well-being, it is recommended that you seek the advice of a licensed mental health or licensed addictions counselor prior to enrolling in the BAC. Please carefully consider how the course content may impact your own and clients' well-being. Emotional, psychological, or substance abuse issues may become more severe under the stress of BAC education. If you manifest problems that interfere with your successful progress in the program, you are strongly encouraged to seek appropriate professional assistance. If these problems continue to interfere with

your progress, you may be asked to withdraw from BAC. A history of substance abuse problems would not necessarily exclude you from the BAC program.

Please initial, indicating that you have read and understand this statement.

Applicant Initials

Date

Section IV.
Information on Legal Issues

Since the first concern of addiction counseling and related organizations is the welfare of clients, many require specific background, criminal record checks, and/or child abuse and neglect checks prior to accepting students for an Applied Clinical Experience. They may restrict students with felony convictions, certain misdemeanor convictions, or other legal and investigative issues from an Applied Clinical Experience within their organization. Any fees related to a background check are assumed by the student.

The following questions are required of all applicants for eligibility determination as part of the application for licensure with the New Mexico Counseling and Therapy Practice Board and as a part of the application to the BAC Program. Please visit their website at <http://www.rld.state.nm.us/Counseling/index.html> for more information.

Failure to provide the requested information may result in the inability to process your application. Students should note that false statements on this application are considered unethical behavior and consequently grounds for termination from the BAC Program. If you have a criminal background, you may not necessarily be excluded from BAC, however it may limit your ability to get an ACE placement or licensure. These are the questions you will be asked to respond to for licensure as well.

****Please answer the following questions: Give details of any "yes" answers.**

- a. Have you ever used another name (including your maiden name if married and adopted your partner's last name) under which records relating to your application, education, training or experience may be filed?

Yes

No

If yes, please enter name(s) used: _____

- b. Have you ever received a deferred prosecution or judgment or been convicted of, or pled guilty or nolo contendere to a felony or misdemeanor (not including traffic violations) in any state, territory or district of the United States or a foreign country?

Yes

No

If yes, please explain: _____

- c. Has any disciplinary action ever been started against you as a result of your counseling or therapy services or any license you hold or have held to practice counseling or therapy? (Disciplinary action includes but is not limited to suspension, probation, practice limitations, reprimand, letter admonition, censure, and any allegations currently pending).

Yes

No

If yes, please explain: _____

- d. Have you ever been a defendant in a legal action involving professional liability (malpractice), or had a professional liability claim paid in your behalf, or paid such a claim yourself?

Yes

No

If yes, please explain: _____

- ii. Have you ever had any malpractice claims made against your license in New Mexico or any other state, foreign country or territory?

Yes

No

If yes, please explain: _____

- iii. Have you had any judgments or entered into any settlements regarding malpractice claims made against you in New Mexico or any other state, foreign country or territory?

Yes

No

If yes, please explain: _____

- e. Have you ever voluntarily surrendered a license or certification to practice Counseling, Therapy or any other health related profession in any state, foreign country, territory, or institution?

Yes
 No

If yes, please explain: _____

- f. Do you have any personal or legal problems with alcohol or drugs that in any way affect your ability to be a counselor or therapist?

Yes
 No

If yes, please explain: _____

- g. Have you ever pled guilty or nolo contendere to or been convicted of:

- i. driving under the influence or driving while intoxicated?

Yes ___
 No ___

If yes, please explain: _____

- ii. underage possession of drugs or alcohol?

Yes
 No

If yes, please explain:

- iii. sales of alcohol or drugs to minors?

Yes
 No

If yes, please explain:

- iv. drug possession and/or distribution?

Yes
 No

If yes, please explain:

- h. Have you ever been denied a license or permission to take an examination to practice Counseling or Therapy in any state, foreign country or territory?

Yes__

No__

If yes, please explain:

- i. Do you have any mental illness that affects your ability to be a counselor or therapist?

Yes

No

If yes, please explain:

- j. Do you now have any pending lawsuits or claims regarding counseling or therapy services in any capacity?

Yes

No

If yes, please explain:

- k. The 1995 NM Legislature passed a law requiring licensing boards to review lists of individuals who are in violation of compliance with court- ordered child support payments and to request certain information. If you are in arrears, you will not be issued a license until you are in compliance. Are you in arrears in court-ordered child support payments?

Yes

No

If yes, please explain:

*** These questions are on the NM Counseling and Therapy Practice Board's applications for licensed substance abuse associate (LSAA) and licensed alcohol and drug abuse counselor (LADAC).*

I certify that the above background information is true and correct.

Signature

Date