Colorado Education Equivalency Review

For Addiction Counselor 2018 Application

This application form is interactive.

Download the form to your computer to fill it out.



3 TERRACE WAY
GREENSBORO, NORTH CAROLINA 27403-3660 USA
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The Center for Credentialing & Education, Inc. (CCE), on behalf of the state of Colorado, performs the education equivalency review for licensed addiction counselor candidates. Any correspondence outside of the education equivalency review should be directed to the state of Colorado at 303-894-7800.

CCE's review is based on Colorado Rule 14 [Licensure by Examination (CRS 12-43-804)]. Colorado State Board of Addiction Counselor Examiners Rules are available online at https://www.colorado.gov/pacific/dora/Addiction Counselor.

Applications will be held open for one year from the date of initial review. Please note that CCE cannot return or duplicate an application. Prior to submitting your application to CCE, please make a copy of it for your records.

HOW TO CONTACT CCE

Telephone (toll-free): 888-817-8283

Telephone Hours: 8:30 a.m. to 5 p.m. Eastern time; 6:30 a.m. to 3 p.m. Mountain time (Monday–Friday)

E-mail: cce@cce-global.org
Fax: 336-482-2852

Send written correspondence to: CCE • 3 Terrace Way • Greensboro, NC 27403-3660

Reviews are conducted in order of receipt and completed within six weeks. Failure to include all required items listed on page 3 will result in the need for additional reviews. Each subsequent review takes six weeks from the date of document receipt.

In order to protect candidates from miscommunication or misinformation, CCE asks applicants to submit in writing any questions regarding their education review. Questions can be sent via e-mail, postal mail or fax. CCE responds to all questions in the order they are received.

As an applicant for licensure education review, you have the right to appeal the findings on the education review completed by CCE. Please be aware that all applications for education equivalency review in Colorado are reviewed by CCE, which is the contracted agent for the Colorado State Board of Addiction Counselor Examiners, and the credential review is based on the Colorado Code of Law, Section 12-43-804 and Rule 14: Colorado Board of Addiction Counselor Examiners Rules. These requirements must be met in full.

Education Equivalency for Addiction Counselor Certification

When an applicant submits college courses on an application to the Center for Credentialing & Education (CCE) in lieu of one of the required training classes, it is the applicant's responsibility to demonstrate how their college course is equivalent to the Office of Behavioral Health (OBH) approved core competencies for that class. Anyone wishing to use college equivalents must submit the following to CCE:

- An official transcript from an accredited college or university in a sealed envelope. The courses must be in a behavioral health science or field. Each college class being offered as the equivalent of a CAC required class must have a grade of C or above.
- 2. A cover letter with an attached syllabus and a written description about why the college class is equivalent to the CAC required class.
- 3. A college course must offer college credits that are equivalent or greater than the number of clock hours required for the OBH training class.

College equivalency hours:

One semester credit hour = 15 clock hours

Two semester credit hours = 30 clock hours

Three semester credit hours = 45 clock hours

One quarter credit hour = 8.5 hours

Two quarter credit hours = 17 hours

Three quarter credit hours = 25.5 clock hours

CAC required classes that must be taken (no college course equivalency)

Client Record Management, 14 hrs.

Infectious Diseases in Addiction Treatment, 14 hrs.

Pharmacology I, 14 hrs.

Pharmacology II, 14 hrs.

Trauma Informed Care for Diverse Populations, 14 hrs.

Clinical Supervision I, 21 hrs.

Clinical Supervision II, 14 hrs.

CAC required classes that may have college equivalency (see core competencies posted on the OBH website)

Addiction Counseling Skills, 21 hrs.

Principles of Addiction Treatment, 21 hrs.

Culturally Informed Treatment, 14 hrs.

Professional Ethics I: Ethics and Jurisprudence, 14 hrs.

Professional Ethics 1 1, 14 hrs.

Motivational Interviewing, 21 hrs.

Cognitive-Behavioral Therapy, 14 hrs.

Clinical Assessment and Treatment Planning, 14 hrs.

Co-Occurring Disorders, 14 hrs.

Group Counseling Skills, 21 hrs.

Advanced Motivational Interviewing, 14 hrs.

Professional Practice, 7 hrs.

Suffix

FORM A-COMPLETED CAC TRAINING/EDUCATION

(If you hold a Clinical Master's or Doctorate degree, do not use this form. Use FORM B)

APPLICANT: It is your responsibility to ensure that you have completed the required coursework below or have educational equivalency for your level. Refer to the CAC Handbook for Addiction Counselors, available at www.cce-global.org/BusinessLicensureServices/StateLicensure.

Middle:

> Complete this form to document all courses for the level for which you are applying.

Firet:

- > If you already hold a certification for previous level(s), you do not need to document those courses.
- > Submit a copy of your certificate(s) for all courses you document on this form.

Applicant Last Name:

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Address:	City:		State:	ZIP:
Training/Courses		Training Date(s)	Train	er Name (print)
	C	AC LEVEL I		
Addiction Counseling Skills				
Client Records Management				
Principles of Addiction Treatment				
Professional Ethics I (Ethics and Juris	sprudence)			
Culturally Informed Treatment				
Infectious Diseases in Addiction Treate	ment			
Pharmacology I				
	C.	AC LEVEL II		
Document completion of all CAC Level document CAC Level I courses above.	II courses belo	ow. If you do not already ho	old CAC Level I	certification, also
Professional Ethics II				
Motivational Interviewing				
Cognitive Behavioral Therapy				
Group Counseling Skills				
Pharmacology II				
Clinical Assessment & Treatment Plan	ning			
Co-occurring Disorders				
Trauma Informed Care for Diverse Po	opulations			
	CA	AC LEVEL III		
Document completion of all CAC Level also document CAC Level I and/or II compared to the complete of the compl			old CAC Level I	and/or II certification,
Clinical Supervision I				
Advanced Motivational Interviewing				
Clinical Supervision II				
Professional Practice				

Suffix:

FORM B-COMPLETED CAC TRAINING/EDUCATION

Clinical Master's or Doctorate Degree Applicants

APPLICANT: It is your responsibility to ensure that you have completed the required coursework below or have educational equivalency for your level. Refer to the CAC Handbook for Addiction Counselors, available at www.cce-global.org/BusinessLicensureServices/StateLicensure.

First:

Middle:

- > Document all courses completed on this form.
- > Submit a copy of your certificate(s).

Applicant Last Name:

Clinical Supervision II

Address:	City:	State:	ZIP:					
Training/Courses	Training Date(s)	Trainer Name (print)						
CAC LEVEL II								
Principles of Addiction Treatment								
Infectious Diseases in Addiction Treatment								
Pharmacology I								
Pharmacology II								
Motivational Interviewing								
Group Counseling Skills								
Professional Ethics II								
	CAC LEVEL III							
Document completion of all CAC Level II co	ourses above, plus the following:							
Advanced Motivational Interviewing								
Clinical Supervision I								



Colorado Education Equivalency Payment Voucher

PLEASE NOTE

- All fees must be paid in U.S. dollars.
- All fees are nonrefundable and nontransferable.
- Review results will be sent six weeks after application receipt.
- You will be notified in writing of your status and informed if further information is needed.
- Please make check or money order payable to CCE.

METHOD OF PAYMENT

Appli	cant's Name	; :			_					
Γele	phone:	DAY:		EVENING:	_					
	Enclosed is a check or money order payable to CCE in the amount of \$100.									
	☐ Please charge the credit card listed below in the amount of \$100.									
	Card Type:	☐ VISA	☐ MasterCard	American Express						
	Name on C	ard:			_					
	Account Number:									
		Card Security Code (fr	rom back of card):							
	Expiration Date:									
	Cardholde	er Signature		Date (mm/dd/vvvv):						

SUBMIT YOUR APPLICATION AND PAYMENT

- Mail: CCE; P.O. Box 63223; Charlotte, NC 28263-3223
- Fax: 336-482-2852