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Arizona Board for Certification of Addiction Counselors

Application for CAC/CADAC/AADC Recertification

Credential CADAC
ABCAC Certificate # 1848
ICRC Certificate # 830988

Please print clearly or type; complete all sections:

DEMOGRAPHIC UPDATE

Name Schmidt Carole
LAST FIRST MI

Social Security Number _____ Entry Date in Field 1992

Home Phone (602) 481-5009 Work Phone (602) 275-4467

Street Address 207 W. Clarendon Ave Unit 21E

City Phoenix State AZ ZIP 85013

Email address Carole0315@aol.com

Present Position Bid Coordinator How long? 5 years

Employer Norman S. Wright

Name of Supervisor Nikki Schroeder Phone (602) 275-4467

FORMAL EDUCATION

Highest Level of Education Associates of Applied Science Major Jewelry Design

Name of Institution Fashion Institute of Technology Dates Attended 6/77-6/79

Other Chemical Dependency Level I + level II Certificates

Name of Institution Rio Salado Community College Dates Attended 9/92-6/96

Attach documentation for any Formal Education obtained within the last two years.

CONTINUING EDUCATION From 12/30/22 To 12/30/24

Approved Training/Education 40
(NO. OF HOURS)

Related Inservice Training 0
(NO. OF HOURS)

TOTAL 40

CREDENTIALING BACKGROUND INFORMATION

Do you hold, or have you ever held licensure, certification, or registration in any other state or with any other agency? *If yes, complete the following:*

Yes No

Title of Credential	State/Agency	Date of Issue	Current Status
<u>LISAC</u>	<u>AZBBHE</u>	<u>7/1/04</u>	<u>active</u>

Do you hold or have held a certificate through a behavioral health professional association? *If yes, cite professional credential held.*

Yes No

Credential _____ **Agency** _____ **Current Status** _____

Have you ever applied for and been denied a license, certificate or registration with any authorized certifying agency?

Yes No

Have you ever had any disciplinary action taken against you by the authority issuing a license, certificate or registration in any behavioral health profession?

Yes No

Have you surrendered or cancelled your license, certification or registration in lieu of disciplinary proceedings by the issuing authority in any behavioral health profession?

Yes No

Have you ever been the subject of a disciplinary action by a regulatory committee of a professional association?

Yes No

Have you ever been convicted or pled guilty or pled no contest to a criminal offense?

Yes No

Have you ever been the defendant in a malpractice suit and either entered into a settlement agreement or paid court-awarded damages, or is such a suit pending?

Yes No

Have you ever been involuntarily terminated from any behavioral health or related employment for unprofessional conduct?

Yes No

If the answer to any of these questions is YES, please explain below. Use separate sheets as necessary. Please enclose any relevant documents.

I certify that the above information is correct and no attempt is made to make fraudulent claims of competency or to withhold pertinent information that may influence the granting of this ABCAC certificate of competency.

Signature Carole Schmidt

DOCUMENTATION OF SUBSTANCE ABUSE RELATED CONTINUING EDUCATION

The following continuing education was obtained during the period 12/30/22 to 12/30/24

<u>Course/Title</u>	<u>Presented by</u>	<u>Provider #</u>	<u>Hours</u>
Ethics + Boundary Issues	CE4 less	NAADAC 91345	3
Cultural Diversity ^{Family +} _{organizational} Cultures	CE4 less	NAADAC 91345	3
AZ Statutes / Regulations	CCE	-	3
Collaborative Approach to Tx of Pregnant Women w/opioid Use Disorders	CE4 less	NAADAC 91345	2
Benzodiazepines	CE4 less	NAADAC 91345	1
Buprenorphine Naloxone	CE4 less	NAADAC 91345	1
Cocaine Use Disorder	CE4 less	NAADAC 91345	1
Fentanyl	CE4 less	NAADAC 91345	1
Fetal Alcohol Spectrum	CE4 less	NAADAC 91345	2
Heroin + opioid Pandemic	CE4 less	NAADAC 91345	2
Screening + Assessment of Co-occurring Disorders in the Justice System	CE4 less	NAADAC 91345	4
MDMA Ecstasy	CE4 less	NAADAC 91345	3
Approved Correspondence Course/Self Directed Study Courses			
Medications for ^{Opioid Use} _{Disorder}	CE4 less	NAADAC 91345	3
Substance Use + Addiction During Pregnancy	CE4 less	NAADAC 91345	1
Therapeutic Communities	CE4 less	NAADAC 91345	1
^{+ Professional Development} Clinical Supervision	CE4 less	NAADAC 91345	6
Clinical Supervision Tutorial	CCE	-	3

I certify that the above training/education has been completed and this ledger is accurate. I have attached documentation for all listed hours of education.

Signature Carole Schmidt

