

Request for Supervisor Exemption Substance Abuse

Name: _____ Phone: _____

Address: _____ SSN: _____

Dear Applicant:

A.A.C. R4-6-706(D) states that supervision must be by an independent substance abuse counselor licensed in Arizona. If your supervision was not provided by a LISAC licensed in Arizona, you must request an exemption. To request an exemption, please complete this form and return it to the Board. You may copy this form as needed.

I am requesting an exemption to the supervision rule according to A.A.C. R4-6-706(E). My supervision has been as follows:

Supervisor's name: _____

Supervisor's credentials and state where credentials are held (degrees, licenses, etc.): _____

Supervision dates (time frame): _____

Supervision hours: _____

Individual: _____

Group: _____

Agency/Location where supervision took place: _____

If your supervisor was not a substance abuse counselor, you must provide a statement explaining why you feel you received the appropriate supervision:

Signature: _____ Date: _____

A copy of your supervisor's curriculum vitae or resume, a copy of their graduate transcript and proof of their compliance with A.A.C. R4-6-212(j) must be attached to this form. If the curriculum vitae or resume, transcript and proof of continuing education are not attached or if this form is incomplete, your request will not be processed and the form will be returned to you for completion.