



# The RADACT Program

3901 Old Seward Highway Ste 8  
Anchorage, AK 99503  
Phone (907) 563-9202  
Fax (907) 562-7948  
[www.radact.com](http://www.radact.com)

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## RE: FY13 ADDICTION AND BEHAVIORAL HEALTH AIDE COUNSELOR TRAINING ACADEMY

Dear Counselors and Program Managers:

The Regional Alcohol and Drug Abuse Counselor Training (RADACT) Program is sponsoring a three-week training academy from Monday, September 17, 2012, through graduation Thursday evening October 4, 2012, for Counselor Technician, Level One Counselors, and Behavioral Health Aides at the **Crowne Plaza Midtown - Anchorage**. Check in for students staying at the hotel will be Sunday, September 16, 2012 after 4:00 pm. Check out will be Friday, October 5, 2012 by noon. Classes will start at 8:00 am on Monday, September 17, 2012.

Completion of the academy will provide 112 training hours toward Counselor Technician certification or 112 hours toward upgrading from Counselor Technician to Level One Certification through the Alaska Commission for Behavioral Health Certification (ACBHC). For certification fees and additional information about certification requirements, contact ACBHC at 907-332-4333. The academy will also provide 112 hours toward Behavioral Health Aide certification through the Community Health Aide Program Certification Board.

Students will also have the additional opportunity to purchase eight (8) academic credits through the University of Alaska, for their academy attendance. The purchase of academic credits is optional. Neither RADACT nor UAA guarantee that the entire eight (8) credits will transfer toward a specific degree, or to a specific university. As the credits are 290 credits, your fee covers administrative costs only. This means that you pay a flat amount regardless of the number of credits. The two hundred dollar (\$200.00) fee is the same whether you are purchasing one (1) or eight (8) credits. **Proof of residency and recent name changes will need to be submitted with your university registration. All outstanding bills with the university will need to be resolved before they will accept your registration. An Information sheet to help you with this is enclosed.**

There is a **\$2,500.00** non-refundable fee per trainee. The fee will cover housing for nineteen (19) days. Breakfast, lunch and dinner for fourteen (14) days will be provided, and breakfast only on Saturdays and Sundays. The fee will also cover tuition, textbooks, training manual, and miscellaneous student supplies such as pens, notepads, highlighters, etc.

Limited scholarships may be available through the Division of Behavioral Health. **To be eligible for a scholarship you must be employed in a Behavioral Health funded program.** Rural preference will be given. If you are eligible for a scholarship please complete the attached scholarship application form. **Transportation to and from the academy, certification fees, the purchase of college credits, or lunch and dinner on Saturday's and Sunday's will not be a part of the scholarship award.** Scholarship applications must be received by RADACT no later than **5:00 pm on Friday, August 17, 2012, and must include both the applicant's and supervisor's letter regarding the scholarship.**

Trainees will be staying in **shared non-smoking suites**. Each trainee will share a suite with one other student. Each suite has two beds, with a microwave and a small refrigerator. A pool,

whirlpool and fitness center are located on the first floor. Single rooms are available at an additional cost.

Academy cost for students not requiring housing is **\$1,465.00**. This will include tuition for fourteen (14) days, lunch, textbooks, training manuals, and all necessary supplies.

This three week training academy will be an intensive learning experience, with classroom days from 8:30 am to 5:00 pm, Monday through Friday. Students will stay at the training facility, and will take their meals together Monday through Friday. Because RADACT will contract for meals Monday through Friday, there will be no reimbursement for trainees who decide to eat away from the facility. **Lunch and Dinner will not be provided on Saturday and Sunday.** Breakfast only will be provided on weekends for students staying at the hotel.

If you need financial assistance, you can contact directly one of the **State of Alaska Job Centers** nearest to you. Google: Alaska Job Center. Under Alaska Job Center network click on workplace Center. You can then find the Alaska Job Center nearest to you.

All students applying to the academy will receive a letter acknowledging receipt of their Application. If you do not hear from us do **not** assume we have received your registration.

A place will not be reserved for you in the academy ***until all funds have been received by RADACT.*** Students with properly completed applications, and full payment included, will be accepted on a first come, first served basis.

**PAYMENT IN FULL MUST BE RECEIVED BY SEPTEMBER 7, 2012 AT RADACT OFFICE**

**DO NOT CALL THE CROWNE PLAZA-ANCHORAGE TO MAKE ROOM RESERVATIONS.**

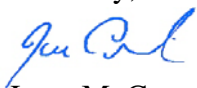
**ALL RESERVATIONS WILL BE ARRANGED BY RADACT STAFF.**

**REMEMBER: A ROOM WILL NOT BE RESERVED FOR YOU UNTIL WE RECEIVE FULL PAYMENT**

**TRANSPORTATION COSTS ARE NOT INCLUDED IN THE ACADEMY FEE.**

If any have any further questions regarding the academy, or you have not received a letter confirming your registration, please contact Sherry Lovell or myself at the RADACT office, 1-907-563-9202, between 8:00 am until 5:00 pm, Monday through Friday.

Sincerely,



Janet M. Carter, M.Ed.  
Executive Director/ Trainer

**COLLEGE CREDIT THROUGH UAA**  
**++++++REVISED – January 20, 2012++++++**

**Instructions to obtain your Proof of Residency, Name Change and Outstanding Bills**

**1. TO OBTAIN YOUR PFD INFORMATION**

Go on Line:

- a. [www.pfd.state.ak.us](http://www.pfd.state.ak.us)
- b. Look up your name and print off information regarding your status with the Permanent Fund Dividend.
- c. If this does not work “google” Alaska Permanent Fund Dividend. It will take you to the web site.
- d. Follow the site guidelines to see how to access your personal information.

**2. TO OBTAIN YOUR UAA APPLICATION FOR RESIDENCY**

Go on Line:

- a. [www.uaa.alaska.edu/admissions/forms.cfm](http://www.uaa.alaska.edu/admissions/forms.cfm)
- b. Open: Residency
- c. Fill out the form. Print the form and attach to your PFD information

**3. TO OBTAIN YOUR UAA CHANGE FORM**

Go on Line:

- a. [www.uaa.alaska.edu/admissions/forms.cfm](http://www.uaa.alaska.edu/admissions/forms.cfm)
- b. Open: Change form ( change name, Id, etc.
- c. Print the form. Fill out the form and attach to your UAA Registration.

***FULL PAYMENT FOR UNIVERSITY CREDIT, AND PROOF OF RESIDENCY MUST BE ATTACHED TO YOUR UAA REGISTRATION FORM, AND SUBMITTED TO RADACT BY **THURSDAY, September 20, 2012 BY 12:00 noon*****

**PLEASE REMEMBER .... ALL OUTSTANDING BILLS WITH UAA MUST BE RESOLVED BEFORE YOU SUBMIT APPLICATION, OR UAA WILL NOT ACCEPT YOUR REGISTRATION.**

To find out if you have an outstanding debt go to: [www.uaa.alaska.edu](http://www.uaa.alaska.edu)

Open: Admissions

Fill out the application it will tell you if you have an outstanding debt. **You do not submit the application; you are using it for informational purposes only.**

# THE RADACT PROGRAM

## THREE WEEK ACADEMY

September 17 through October 4, 2012

### RADACT

3901 OLD SEWARD HIGHWAY SUITE 8 ANCHORAGE, AK 99503

TEL: 907-563-9202 FAX: 562-7948

### REGISTRATION FORM

### COUNSELOR TECHNICIAN / LEVEL ONE

Name : \_\_\_\_\_

Address: \_\_\_\_\_ (city) \_\_\_\_\_ (state) \_\_\_\_\_ (Zip) \_\_\_\_\_

Phone #'s (home) \_\_\_\_\_ (work) \_\_\_\_\_

(E-mail) \_\_\_\_\_

Agency of Employment: \_\_\_\_\_

Agency of Employment Address: \_\_\_\_\_

Position at Agency: \_\_\_\_\_

Length of time employed with Agency: \_\_\_\_\_

Total number of years employed in the addictions/behavioral health field: \_\_\_\_\_

Total number of counselor training hours (Through regional trainers, college, annual school, etcetera): \_\_\_\_\_

What level will you be attending? Counselor Technician (entry level)  Level One

Do you require housing? Yes (\$2,500.00)  No (\$1,465.00)

Would you like to receive information about purchasing academic credits for your academy attendance? Yes  No

Have you enclosed your payment for the training with your application? Yes  No

**If you did not enclose your payment with your application you must complete the section that identifies the person or agency that is financially responsible on the second page of this application. Applications submitted without this information CANNOT be processed until the information is received. I ALSO TESTIFY THAT ALL THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE.**

Signed: \_\_\_\_\_

Name (Please Print): \_\_\_\_\_

Date: \_\_\_\_\_

## **APPLICANT'S COMMITMENT OF ATTENDANCE**

I \_\_\_\_\_, agree to attend the entire three week training academy to be held in Anchorage from September 17, 2012 through October 4, 2012. I also understand that there will be no reimbursement of fees for any portion of the academy not completed.

Signed: \_\_\_\_\_

Name (please print) \_\_\_\_\_

Date: \_\_\_\_\_

## **SUPERVISOR'S WORK RELEASE FOR APPLICANT**

I, \_\_\_\_\_, promise to release \_\_\_\_\_ from their employment responsibilities for three weeks, from September 17, 2012 through graduation on October 4, 2012, in order that he/she may attend the entire three week RADACT training academy. Please contact the RADACT office if you have any questions before signing this agreement.

Signed-Supervisor/Director \_\_\_\_\_

Name (please print) \_\_\_\_\_

Date: \_\_\_\_\_

## **FINANCIAL DETAILS**

The following program/individual is financially responsible for my tuition to attend the September 17, 2012 through October 4, 2012 session of the Addictions & Behavioral Health Counselor Training Academy. I understand the FULL PAYMENT MUST BE RECEIVED before I can attend this session.

Agency/Name: \_\_\_\_\_

Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Date: \_\_\_\_\_

**REGISTRATION WILL BE CLOSED WHEN THE ACADEMY IS FULL**

**THE RADACT PROGRAM**  
**THREE WEEK ACADEMY**  
**SEPTEMBER 17, 2012 THROUGH OCTOBER 4, 2012**

RADACT  
3901 OLD SEWARD HIGHWAY STE #8, ANCHORAGE, AK 99503  
TEL: 907-563-9202 FAX: 562-7948

**SCHOLARSHIP APPLICATION FORM ONLY**  
**SCHOLARSHIP APPLICATIONS MUST BE RECEIVED**  
**BY 5PM, FRIDAY, AUGUST 17, 2012**  
**COUNSELOR TECHNICIAN / LEVEL ONE**

Name : \_\_\_\_\_  
Address: \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (ZIP)  
Phone #'s (home) \_\_\_\_\_ (work) \_\_\_\_\_  
(E-mail) \_\_\_\_\_  
Agency of Employment: \_\_\_\_\_  
Agency of Employment Address: \_\_\_\_\_  
\_\_\_\_\_  
Position at Agency: \_\_\_\_\_  
Length of time employed with Agency: \_\_\_\_\_  
Total number of years employed in the addiction/behavioral health field: \_\_\_\_\_  
Total number of counselor training hours (Through regional trainers, college, Annual School, etcetera): \_\_\_\_\_

What level will you be attending? Counselor Technician (entry level)  Level One

Would you like to receive information about purchase of academic credits for academy attendance YES  NO

**I TESTIFY THAT ALL THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE. I ALSO UNDERSTAND THAT RADACT MUST RECEIVE THIS APPLICATION AT THEIR ANCHORAGE OFFICE BY 5PM, FRIDAY, AUGUST 17, 2012 FOR ME TO BE CONSIDERED FOR A SCHOLARSHIP. (APPLICATION MAY BE FAXED TO RADACT @ 907-562-7948.)**

Signed: \_\_\_\_\_  
Name (Please Print): \_\_\_\_\_  
Date: \_\_\_\_\_

**APPLICATION DEADLINE AUGUST 17, 2012**

# SCHOLARSHIP APPLICATION

## APPLICANT'S COMMITMENT OF ATTENDANCE

I, \_\_\_\_\_, agree to attend the entire three-week training academy to be held in Anchorage from September 17, 2012 through October 4, 2012. I also understand that I will be required to reimburse the Division of Behavioral Health for ***any*** portion of the academy not completed.

Applicant's Signature: \_\_\_\_\_

Name (Please print): \_\_\_\_\_

Date: \_\_\_\_\_

***Applicant must submit a one page letter with this application describing how receiving the scholarship will assist in your educational and employment goals.***

***Applications will not be processed without the letter.***

## SUPERVISOR'S WORK RELEASE FOR APPLICANT

I, \_\_\_\_\_, promise to release \_\_\_\_\_ from their employment responsibilities for three weeks, from September 17, 2012 through October 4, 2012 so that they may attend the entire three week RADACT training academy. Please contact the RADACT office if you have any questions before signing this agreement.

Supervisor's / Director's Signature: \_\_\_\_\_

Name (Please print): \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

***Supervisor must submit a one page signed letter with this application, stating how follow up will be provided to the scholarship applicant after they have completed the academy.***

***Applications will not be processed with out the letter.***