

**Addictive Disorder Regulatory Authority
(ADRA)**

CASE PRESENTATION

By:

Applicant's name (please type)

COUNSELOR'S STATEMENT

I hereby certify that I prepared this case presentation and that it represents an actual/typical case of mine.

I, the undersigned, understand that the written case presentation will be the property of the ADRA upon my submission of the materials for review by the ADRA.

I also understand that this material may be reviewed by the Certification Board and its designated agents for evaluation and research purposes.

SIGNATURE: _____

DATE: _____

SUPERVISOR'S STATEMENT

I hereby certify that I have read this case presentation, that it represents an actual/typical client case of the applicant, and that, to the best of my knowledge, it was prepared by the applicant.

NAME: _____
(please type)

TITLE: _____

NAME OF AGENCY: _____

SIGNATURE: _____

DATE: _____