

**BOARD OF EXAMINERS OF ALCOHOLISM
AND DRUG ABUSE COUNSELORS**

LICENSURE RENEWAL FORM

**Return the following items in one packet:
renewal will not be processed if sent separately:.**

- 1. Biennial Renewal Fee and this form (Post-marked on or before December 31, 2009) Fee scheduled: LADAC - \$200, LAADAC - \$150, CADAC - \$100
*To avoid possible delays in processing your license, all renewal material and fees must be submitted by November 1, 2009.***
- 2. Continuing Education Documentation (Minimum of 40 hours completed during the time frame of January 1, 2008 through December 31, 2009). * See enclosed Continuing Education Documentation Form.**
- 3. Contact Information Form (enclosed).**

Counselors licensed under Act 443 of 2009 shall be required to submit biennially at the time of renewal, a license renewal fee to be established by the Board. No license shall be renewed unless the renewal request is accompanied by evidence satisfactory to the Arkansas Board of Examiners of Alcoholism and Drug Abuse Counselors of completion during the previous twenty-four (24) months of relevant professional or continuing education experience. Failure to pay the biennial renewal fee within the time stated shall automatically suspend the right of any licensee to practice while delinquent.

If all renewal materials and fees are not submitted by December 31, 2009, your license expires, effective December 31, 2009. Unless your license is renewed by December 31, 2009, it will automatically be suspended until all delinquent materials are submitted and approved by the Board. If your license is not reinstated within six (6) months, you must apply as a new applicant. Any practice while your license is suspended is in violation of Act 443 of 2009. Any license renewal after December 31, 2009 will be assessed a late renewal fee of \$50 per month, or any part of a month, in addition to the biennial renewal fee.

**Board of Examiners of Alcoholism and Drug Abuse Counselors
P.O. Box 17118
Jonesboro, AR 72403**

As a Licensed Alcoholism and Drug Abuse Counselor I understand that I have the sole responsibility to ensure that all necessary fees and documents are received in timely fashion by the Board for renewal.

(Printed Name)

(Date)

(Signature)