



Please send completed form & payment to:  
 Counselor Education Department  
 Attn: Kate Hohenstein  
 University of Montana  
 32 Campus Drive  
 Missoula, MT 59812

## Addictions Counseling Registration Form

This course will provide training in addiction counseling, motivational interviewing, and the application of motivational enhancement techniques in both group and individual treatment modalities. It will examine how to use various therapeutic orientations and tools to address addictions. The course is scheduled to meet online between July 10<sup>th</sup> and August 4<sup>th</sup>, 2017.

### PARTICIPANT INFORMATION

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_  
 Mailing address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Primary Phone No. (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Primary email Address \_\_\_\_\_

### FOR UNIVERSITY OF MONTANA STUDENTS SEEKING CREDIT

**CRN: 201740/40076**

If you're a University of Montana Student and wish to complete the course for 3 credits (COUN 495), complete the information below and include a check for **\$800** (made payable to the Children's Museum Missoula).

UM student ID # 790 \_\_\_\_\_ Birth Date (Month/Day/Year) \_\_\_\_\_

To receive graduate credit, please complete the following regarding your last degree earned:

Degree granted \_\_\_\_\_ Year \_\_\_\_\_ Institution \_\_\_\_\_

I hereby certify that, to the best of my knowledge, the foregoing information is true and complete without evasion or misrepresentation.

Your signature \_\_\_\_\_ Date \_\_\_\_\_

### FOR PROFESSIONALS SEEKING CONTINUING EDUCATION UNITS

The Dept. of Counselor Education is an approved provider of continuing education units (CEUs) by the NBCC. Attendees will earn 45 CEUs for the course.

If you wish to complete the course for 45 Continuing Education Units (CEUs), complete the top portion of the form and include a check for \$800 (made payable to the Children's Museum Missoula) with your registration.

I hereby certify that, to the best of my knowledge, the foregoing information is true and complete without evasion or misrepresentation.

Your signature \_\_\_\_\_ Date \_\_\_\_\_