

Advanced Certificate in Addiction Treatment & Prevention Services

Application for admission

Date Submitted: _____

Name: _____
First MI Last Previous name(s)

Mailing Address: _____

Email Address: _____ NSHE#: _____

Primary Phone: _____ Additional Phone: _____

Undergraduate Degree: _____

College or University: _____

Graduate Degree: _____

College or University: _____

Please check your reason for pursuing CASAT's Advanced Certificate in Addiction Treatment and Prevention Services:

- Dual Licensure with MFT/MSW/PSY/CPC
- LADC licensure specifically
- Preparation for pursuing master's degree
- Personal interest/knowledge

In order to process your application, please include the following:

- Resume or Vita

Mail to:

CASAT at UNR
1664 N. Virginia St. MS# 0279
Attn: Dr. Meri Shadley
(775) 784 - 6265

Deliver to:

CASAT Office
Orvis Building, Room #225
Attn: Dr. Meri Shadley

Email to:

Dr. Meri Shadley
mshadley@casat.org

CASAT

 Center for the Application of
Substance Abuse Technologies
University of Nevada, Reno

casat.org/academic