



Application pack for endorsement as an Alcohol and Other Drug Support Worker

Please note that you must be a member of dapaanz before you can apply.

For your application, you need:

Completed
(tick)

- | | |
|--|--------------------------|
| 1. Application form (see page 2) | <input type="checkbox"/> |
| 2. Disclosure of convictions (see page 3) | <input type="checkbox"/> |
| 3. Assessment report from your supervisor (see page 4) | <input type="checkbox"/> |
| 4. Form from your line manager supporting your application and verification of qualifications (see page 5) | <input type="checkbox"/> |
| 5. Curriculum Vitae (CV) and copy of certified qualifications to be attached | <input type="checkbox"/> |
| 6. Payment of application fee for \$64.50
Please make cheque payable to Dapaanz. You may pay by direct credit (Kiwibank: 38-9001-0625548-01). You must put your membership number or name in the reference box. If the fee is being paid by your employer, please specify. Receipt and membership certificate will be issued. | <input type="checkbox"/> |

Incomplete documentation will lead to delays in processing your application. Processing commences upon the receipt of your fee.

Post to: Dapaanz, PO Box 25056, Panama Street, Wellington 6146
Courier to: Dapaanz, Level 6, Aviation House, 12 Johnston Street, Wellington 6011



Application for endorsement as an Alcohol and Other Drug Support Worker

1. Name:
2. Membership number:
3. Name you wish to go on the certificate:
4. Address for correspondence: home / work (please circle)

5. Daytime contact phone number:
Mobile number:
E-mail address:
6. Organisation name and town/city:
7. Job title:

8. Name of your line manager:
9. His/her daytime contact phone number:

11. Number of years working in addictions treatment:

Signed: **Date:**



Disclosure of convictions

In order to provide as much protection as we can to the public and to protect the integrity and accountability of dapaanz as a professional association, applicants for endorsement as an Alcohol and Other Drug Support Worker will be required to disclose any offences committed for which they have been convicted in a court of law and that carries a minimum 1 year sentence.

Disclosure is common practice with membership of professional organisations.

The Executive is aware that some applicants will have a criminal history and have made significant changes in their lives since. It is respectful of these experiences and considerate of the length of time since the offending and the nature of the offences.

All applicants must answer the following question. Please circle your answer.

Have you ever been convicted of a criminal offence? yes / no

Sign below and attach the form to your application. If yes, then give year offence(s) committed, nature of offences, charges laid and the outcome and attach on a separate sheet.

Note:

- 1) You may be asked to clarify any matters arising from the disclosure.
- 2) If an applicant is declined endorsement on grounds of the disclosure, the normal appeal procedure will apply.

Name:

Signature:

Date:



Assessment report from Supervisor

Name of Applicant:

Alcohol and Other Drug Support Worker

The applicant for endorsement demonstrates an understanding of their work as an addiction treatment practitioner in the context of the Addiction Intervention Competency Framework (dapaanz 2011). The applicant, under direction and supervision, can work responsibly and safely and within the dapaanz Code of Ethics. The applicant can work competently within set practice boundaries and where appropriate:

- Carry out specialised tasks
- Apply competent practitioner skills with clients not presenting with complex issues
- Analyse information and apply it appropriately
- Understand social justice issues (ethnicity, gender, sexual orientation etc)
- Formulate appropriate responses to a limited range of problems
- Contribute to the management of treatment processes
- Work competently within defined activities
- Be responsible for personal work outcomes and has shared accountability for team outcomes

In accordance with your observation of the applicant’s work, would you assess the applicant as routinely working at an Alcohol and Other Drug Support Worker level?

I assess the applicant, (print name) as competent in routinely working at an Alcohol and Other Drug Support Worker level, within the dapaanz Code of Ethics and in the context of the Addiction Intervention Competency Framework (dapaanz 2011).

I am aware that this statement will form an important part of the assessment of the competency of the applicant and I understand the ethical implications with regard to the applicant’s ability to take up an appropriate role as an Alcohol and Other Drug Support Worker.

Signed:

Name (please print):

Date:

Note: There are two other more advanced levels: 1) endorsement as an Associate Alcohol and Other Drug Practitioner and, 2) registration as an Alcohol and Other Drug Practitioner. Please refer to relevant documents on website.



Support by Line Manager for application for endorsement as an Alcohol and Other Drug Support Worker and Certified Verification of Qualifications

Name of Applicant:

..... is able to meet the requirements of an Alcohol and Other Drug Support Worker and whose standard of practice demonstrates competency, and adherence to ethical standards. I therefore support this application for endorsement as an Alcohol and Other Drug Support Worker.

I confirm that

- (a) I certify that I have sighted the originals of the photocopies of qualifications supporting this application
- (b) I believe them to be a true record of qualifications stated.

I support this application in general.

Signed by:

Name (please print):

Organisation:

Date: