



Institute for Legal, Legislative and Policy Studies  
University of Illinois Springfield  
One University Plaza, MS PAC 451  
Springfield, Illinois 62703-5407

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at Springfield

# Problem and Compulsive Gambling Counselor

## Five-Day Basic Training



October 6, 7, 8, 13 & 14, 2009  
Oakbrook, Illinois

March 2, 3, 4, 9 & 10, 2010  
Springfield, Illinois

Funded through:  
The Illinois Department of Human Services,  
Division of Alcoholism and Substance Abuse

Coordinated by:  
The Institute for Legal, Legislative and Policy Studies  
at the University of Illinois Springfield

# Problem and Compulsive Gambling Counselor Five-Day Basic Training

The Illinois Department of Human Services, Division of Alcoholism and Substance Abuse in conjunction with the Institute for Legal, Legislative and Policy Studies, University of Illinois Springfield is pleased to offer the Problem and Compulsive Gambling Counselor Five-Day Basic Training for all counselors and therapists who want to increase their skill and knowledge in assessing and treating problem and compulsive gambling. This training will provide participants with a strong clinical base from which to deliver problem gambling treatment services. The course curriculum covers assessment, case planning, case management, monitoring, counseling, and advocacy.

The Illinois Alcohol and Other Drug Abuse Professional Certification Association (IAODAPCA) has developed a certification and credentialing process for counselors of problem and compulsive gambling. The Problem and Compulsive Gambling Counselor Five-Day Basic Training will provide participants with the requisite knowledge for the written IAODAPCA certification exam. This training curriculum also reflects IAODAPCA-defined knowledge areas and skills, as well as the role, purpose, functions and responsibilities required in IAODAPCA's evaluation and competency methodology for problem and compulsive gambler behavioral health professionals. This 30-hour course will be delivered throughout a five-day series, divided into two consecutive weeks. The northern course will take place October 6, 7, 8, 13 and 14, 2009 at the Multi-University Center at 1010 Jorie Boulevard, Suite 200 in Oakbrook, Illinois, and the central course will take place March 2, 3, 4, 9 and 10, 2010 at the University of Illinois at Springfield in the Public Affairs Building at One University Plaza in Springfield, Illinois. **Through this training participants may earn up to 30 hours of continuing education units from the Department of Professional Regulations and IAODAPCA.**

**Presenters:** Bensing, DuPont & Associates of Chicago, Illinois.

**Training Schedule:** The training begins promptly at 9:00 a.m and ends at 4:30 p.m, each day. Coffee and tea will be served in the morning, and soft drinks and cookies will be served in the afternoon. Participants are responsible for their own lunch.

*If you have any questions, please contact  
Rebekah Grosboll at (217) 206-6348 or rlanp01s@uis.edu.*

# Problem and Compulsive Gambling Counselor Five-Day Basic Training Registration Form

## Participant Information *(please print)*

Name \_\_\_\_\_  
Title \_\_\_\_\_  
Organization \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

## Training Dates and Location

- |  |  |
|--|--|
| <input type="checkbox"/> <b>October 6, 7, 8, 13 &amp; 14, 2009</b><br>Multi-University Center<br>1010 Jorie Boulevard<br>Suite 200<br>Oakbrook, Illinois 60523 | <input type="checkbox"/> <b>March 2, 3, 4, 9 &amp; 10, 2010</b><br>Public Affairs Center<br>University of Illinois Springfield<br>One University Plaza<br>Springfield, Illinois 62703-5407 |
|--|--|

## Payment Information

- Registration is waived because I certify that I am employed by IDHS or an IDHS/DASA contracted agency.
- Registration is waived because I certify that I am enrolled as a student in the \_\_\_\_\_ (program) at \_\_\_\_\_ (college or university).
- My registration fee of \$100.00 is enclosed:
- Check *\*Make check payable to the University of Illinois Springfield\**
  - American Express     MasterCard     Visa     Discover
- Credit Card # \_\_\_\_\_  
Name on Credit Card: \_\_\_\_\_  
Exp. Date: \_\_\_\_\_ Three-Digit Security Code: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_  
Signature: \_\_\_\_\_

***Registrations must be submitted 10 business days prior to the training.***

**Mail form to:** Institute for Legal, Legislative and Policy Studies  
ATTN: Rebekah Grosboll  
University of Illinois Springfield  
One University Plaza, MS PAC 451  
Springfield, Illinois 62703-5407

