Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 8935
        Madison, WI 53708-8935
Fax #: (608) 251-3036
Phone #: (608) 266-2112

APPLICANT: COMPLETE THIS SECTION AND FORWARD TO YOUR CLINICAL SUPERVISOR.

Last Name First Name MI Former / Maiden Name(s)

I am in a position or have an offer for a position in a supervised Substance Abuse practice. In this position, I will receive supervision exercised by a person authorized to provide supervision per Wisconsin Administrative Code sec. SPS 162.02.

- The supervisor may not permit a supervisee to engage in any substance abuse practice that the supervisee cannot competently perform.
- The supervisor shall not permit a supervisee to engage in any practice that the supervisor cannot competently supervise.
- All supervisors shall be legally and ethically responsible for the supervised activities of the substance use disorder professional supervisee. Supervisors shall be available or make appropriate provision for emergency consultation and intervention. Supervisors shall be able to interrupt or stop the supervisee from practicing in given cases, or recommend to the supervisee’s employer that the employer interrupt or stop the supervisee from practicing in given cases, and to terminate the supervised relationship, if necessary.

Signature of Applicant: ________________________________ Date: __/__/____

Supervisor’s Name: ________________________________
Supervisor’s Credential Number: ____-____
Profession Supervisor is Credentialed: __________
Supervisor’s Signature: ________________________________ Date: __/__/____

DIVISION OF PROFESSIONAL CREDENTIAL PROCESSING
EMPLOYMENT/VOLUNTEER VERIFICATION FORM FOR SUPERVISED SUBSTANCE ABUSE COUNSELOR PRACTICE

Qualified supervisors include: An Intermediate or Independent Clinical Supervisor, a Physician knowledgeable in addiction treatment, a Psychologist knowledgeable in psychopharmacology and addiction treatment, a Clinical Social Worker (including temporary license), a Marriage and Family Therapist (including training and temporary license) or a Professional Counselor (including training and temporary license), who practices as a substance abuse clinical supervisor or provides substance abuse counseling, treatment, or prevention services within the scope of his or her licensure (Wis. Admin. Code § SPS 162.02, WI Stat § 440.88(3m)).

The clinical supervisor shall provide supervision as required per Wisconsin Administrative Code sec. SPS 162.01.

Name of Employer: ____________________________________________________________
Supervisor’s Name: __________________________________________________________
Supervisor’s Credential Number: ____-____
Profession Supervisor is Credentialed: ________________________________
Supervisor’s Signature: ________________________________ Date: __/__/____

CLINICAL SUPERVISOR OF SUBSTANCE ABUSE COUNSELORS-IN-TRAINING: COMPLETE SECTION BELOW AND RETURN DIRECTLY TO DSPS. YOU MAY FAX/EMAIL WITH FACILITY COVER SHEET/LETTER TO: (608) 251-3036 or dspscredsubstanceabuse@wisconsin.gov.

#2770 (Rev. 12/19)
Ch. 440, Stats.

Committed to Equal Opportunity in Employment and Licensing