

NAMA: National Anger Management Association

CERTIFICATION APPLICATION

ANGER MANAGEMENT SPECIALIST—I

ANGER MANAGEMENT SPECIALIST—II

Title: _____ First Name: _____ Middle Initial: _____ Last Name: _____

(Agency or Affiliation if Applicable): _____

Street Address: _____

City _____ State: _____ Zip Code: _____

Please indicate whether the address above is your: Home Address or Business Address

Daytime Phone: _____ Fax : _____ Email : _____

Please enter Email address carefully. We will use it to send confirmation of your application.

PROFESSIONAL BACKGROUND

In order for your application to be processed, you must answer ALL questions COMPLETELY

1. Type of Credentials:

BA / BS RN LPC LSW LCSW LMFT PhD MD

Other - Please specify _____

License No. (if applicable) _____ State _____

2. How many years of experience do you have in providing anger management services?: _____

3. With how many clients are you currently working? 1-10 11-20 21-30 30 or more

4. Years of experience providing anger management service: 1-3 4-6 7-10 10 or more

5. Please check all areas of interest for future trainings. (You may check multiple fields)

Anger Management Updates in Treatment Couples Anger Management Children & Anger

Group Work Adolescent Anger Management Parenting & Anger Other: _____

6. Would you be willing to provide outcome survey information measuring benefits of your work? Yes No

7. Please indicate if you work for:

Agency Private Practice

8. Are you willing to volunteer to provide time and leadership for NAMA? Yes No

Please Specify: _____

9. Please indicate how and when you have fulfilled the Anger Management Content Component

Please specify _____

10. Please indicate name of Approved Supervisor with whom you have fulfilled the Supervision Component and date of completion.

Date of Completion: _____ Name of Approved Supervisor: _____

10. Please include all supporting documentation and \$100 processing fee with this application.

Checks payable to: **NAMA, 2753 Broadway Suite 395, New York, NY 10025**

<mailto:info@namass.org>