



European Certification Board –ECB¹

Application for (re) certification.

Please note: The next deadline for recertification is February 1st 2022.

I hereby apply for certification recertification as:

Alcohol and Other drug Counselor – ECADC

If recertifying, my certification number is: _____

Food Addiction Counselor – ECFAS

If recertifying, my certification number is: _____

Prevention Specialist – ECPS

If recertifying, my certification number is: _____

Clinical Supervisor – ECCS

If recertifying, my certification number is: _____

I confirm that I have read and agree with Ethical Standards on the ECB website

Attached is a confirmation of 40 hours of studies (continuous education) since the last certification was issued (40 CEU equivalent)

Payment for recertification, the amount of €45/ SEK480/ ISK6.000, in addition €23/ SEK240/ ISK3.000 for each recertification, total _____ have been paid into the following account, owned by the European Certification Board:

Bank account: **0516-04-763741**

ID number: **541010-1730**

IBAN: IS84 0516 04 763741 541010 1730

SWIFT: GLITISRE

Name (please print): _____ ID#: _____

Address: _____ e-mail: _____

Signature: _____ Date: _____

To be completed by the European Certification Board:

I verify that the certification named above is in good standing with the European Certification Board.

The credential is **ECADC / ECFAS/ ECPS / ECCS**, next renewal is due February 1st 2022

Signature of board representative

Date

¹ P.O. Box 943 – 121 Reykjavik, Tel: +354-8995210.

E-mail: eurocert@xnet.is