

**National Council on Alcoholism and Drug Dependence –** *Rochester Area*

**Overview of DSM 5
Presenter –** Nancy Crowley, CSW, CASAC

**Date: Friday, February 9, 2018**

 **6 Clock Hours**

**CASAC Renewal Only**

**CPP Section 4**

**CPS Renewal Only**

**Time: 9:00 a.m. – 4:00 p.m.** *(Registration will begin at 8:30 a.m.)*

**Cost: $65**

**Content:** Participants will become familiar with the DSM 5 to include an understanding of Multiaxial Assessment. Participants will learn techniques for using the DSM 5 in their clinical work in a chemical dependency treatment program. Additionally we will explore the similarities and differences between the new DSM 5 and the prior DSM IV TR.

**Registration Deadline: Friday, February 2, 2018**

**Training Location - DePaul’s NCADD-RA**

**1931 Buffalo Road, Rochester, NY 14624**

*Continental breakfast is provided. Please make your own lunch arrangements.
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Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fax/email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Return form with a $65 NON-REFUNDABLE registration fee to:***

 **DePaul NCADD-RA**

**1931 Buffalo Rd**

**Rochester, NY 14624**

 **(585) 719-3481**

**(585) 423-1908** *fax*

**ncadd@depaul.org** *e-mail*

**www.ncadd-ra.org**

**NCADD-RA, Attention: Elaine Alvarado 1931 Buffalo Rd., Rochester, NY 14624**

*For more information, please call or e-mail Elaine at* ***(585) 719-3481****,* *ealvarado@depaul.org* *or Shelly Budinski at* ***(585) 719-3489,*** *sbudinski@depaul.org.*

***\*\*Please complete payment information on reverse\*\****

**Please note training policy on reverse**. Registration confirmation willbe sent via e-mail ONLY.

In the event this training must be canceled or relocated, be sure to include complete contact
information for notification purposes.

**You may also register online at www.ncadd-ra.org**