

# TRAINEE SUPERVISION CHANGES

(PLEASE PRINT OR TYPE)

## TRAINEE PERSONAL DATA:

Name: \_\_\_\_\_  
                    First                            Middle                            Last                            Maiden

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Email: \_\_\_\_\_ Work Email: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Work Fax: \_\_\_\_\_

## TRAINEE EMPLOYMENT DATA:

Agency Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Agency Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Job Title: \_\_\_\_\_

## SUPERVISION DATA (to be completed by supervisor):

Supervisor's Name: \_\_\_\_\_

Supervisor's Credential:      CAC \_\_\_\_\_      LAC \_\_\_\_\_      CPS \_\_\_\_\_

Supervisor's Agency: \_\_\_\_\_

Agency Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Supervisor's Phone: \_\_\_\_\_ Supervisor's Email: \_\_\_\_\_

\_\_\_\_\_  
Signature of Supervisor

\_\_\_\_\_  
Date

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**APPROVAL:** Once the change in supervision has been approved, the BAPP will send an email to both the trainee and the new supervisor.

# Clinical Supervisor Code of Ethics

The Code of Ethics and Standards of Practice can be viewed and/or printed at:

[www.dss.sd.gov/bapp](http://www.dss.sd.gov/bapp).

Clinical Supervision is the process of upholding the ethical standards of the profession and ensuring the professional development of those in training. Clinical Supervisors shall be the professional agent assuming the responsibility for overseeing the processes of ethical development and clinical practice.

Clinical supervision embraces a potential ethical vulnerability; therefore, clinical supervisors shall recognize their influence on the development of human behavior and those under their supervision. They shall be aware of ethical and legal ramifications of the supervision process. Clinical Supervisors shall be responsible for self-evaluation and be accountable to professional review as is consistent within the current scope of addiction services and standards.

**Clinical Supervisors shall uphold the Code of Ethics and Standards of Practice; and, have a responsibility to adhere to “Principle VII: Supervision and Consultation”, to ensure that Trainees receive the supervision necessary for professional development.**

I affirm, understand and will adhere to the Code of Ethics and understand that any violation of the principles will be grounds for disciplinary action and sanctions in accordance with BAPP policies and procedures as outlined in the Standards Manual and the laws of the State of South Dakota. I understand that ethical violations can result in disciplinary actions and sanctions prohibiting any further clinical supervision of trainees recognized by the BAPP and/or disciplinary actions and sanctions against my credential as an Addiction Counselor or Prevention Specialist.

**By checking this box, I hereby attest that I have read and will comply with the Code of Ethics and Standards of Practice of the Board of Addiction and Prevention Professionals.**

This application will not be processed if you fail to read the Code of Ethics and have not checked the box above.

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Signature of Supervisor

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Date