

**Gambling Case Management Program**
AGENCY STAFF CHANGE REQUEST**SECTION A – AGENCY INFORMATION**

AGENCY NAME: _____

CONTRACT NO.: _____

SAP VENDOR NO.: _____

 Remove Gambling Case Manager (*Complete Sections B and E*) Add Gambling Case Manager (*Complete Sections C, D, and E*)**SECTION B – REMOVE GAMBLING CASE MANAGER STAFF**

The following DDAP-approved gambling case manager will no longer be providing Gambling Case Management Services funded by DDAP:

CASE MANAGER NAME: _____ EFFECTIVE DATE: _____

SECTION C – ADD GAMBLING CASE MANAGER STAFF

CASE MANAGER NAME: _____

POSITION/TITLE: _____

CASE MANAGER EMAIL: _____

ADDRESS(ES) WHERE SERVICE(S) WILL BE PROVIDED: (*Provide street, city, state, and zip+4*)_____

PHONE NUMBER(S): _____

Case Management Staff person is (select one) submit verification with this application.

Licensed to practice in Pennsylvania as a physician, psychologist, social worker, marriage and family therapist, behavior specialist, or professional counselor.

Holds a master's degree in psychology, addiction, behavioral services, or similar field and is employed by a Qualified Service Entity and works under the direct guidance and supervision of an individual holding a license to practice in Pennsylvania as a physician, psychologist, social worker, marriage and family therapist, behavior specialist, or professional counselor.

An individual employed by an agency licensed by DHS to provide mental health services and who holds a bachelor's degree that includes or is supplemented by successful completion of 12 college credits in sociology, social welfare, psychology, criminal justice, or other related social sciences.

An individual employed by an agency licensed by DDAP or an SCA and who holds a bachelor's degree that includes or is supplemented by successful completion of 12 college credits in sociology, social welfare, psychology, criminal justice, or other related social sciences.

Has the Case Manager completed any of the trainings below? Submit copies of the training certificates.

Problem Gambling Level 1 training

Problem Gambling Motivational Interviewing Training

Problem Gambling and Finances Training

Problem Gambling Case Management Training

A Case Manager will have 365 days from the date their Provider application is approved to complete the training requirements.

Documentation is required to be submitted to DDAP once the training certificates are obtained.

SECTION D – VERIFICATION OF EDUCATION AND EMPLOYMENT

Verification of the staff person’s education and employment is required by submitting a copy of a post-secondary transcript and one of the following documents with this application: W-2 form, current pay statement, or I-9 Form.

SECTION E – ATTESTATION

Name of Agency Contact *(Please Print)*

Title

Signature of Agency Contact

Date

Department of Drug and Alcohol Use ONLY

Approved

Denied

DDAP Authorized Staff

Approval Date