



## **IGCCB CONTINUING EDUCATION TRAINING PROGRAM INITIAL AND RENEWAL APPLICATION**

Thank you for your interest in providing training programs and continuing education for the International Gambling Counselor Certification Board (IGCCB) certifications and certificates. The Board reviews and approves training program applications for all of our certifications and certificates. Our certifications and certificates require in-depth educational content to uphold the highest standards for professionals in the gaming and gambling disorder fields. The purpose of requesting approval is to ensure the training programs provide educational content that matches our educational training outlines. By seeking approval, your training program will be IGCCB certified and professionals can attend your trainings with confidence as they pursue or continue to maintain their certifications.

We will review all training programs, not individual providers, to determine the following:

1. The contents of the program correspond with our required educational outline
2. The presenter/trainer has sufficient knowledge and expertise in the topics being taught
3. The training uses up-to-date research and other evidence-based information that promotes competency in the fields of gaming and gambling disorders
4. The training program meets adult learning instructional design
5. Quizzes and/or Post Tests evaluate the individual attendees' mastery of knowledge
6. Homework or other assignments further the knowledge to application for the individual attendees
7. And the training programs increase the number of professionals learning about or pursuing certification in the fields of gaming and gambling disorders

The approval covers the training program for 12-months after the approval date. All approved training programs will be listed on the IGCCB website with a link to the Organization/Presenter website for more information and registration. IGCCB is not responsible for answering questions related to any training programs.

Included in the application pack are the application form, fee schedule, and educational crosswalk form that corresponds with each certification. Please allow 4-6 weeks for the IGCCB to process your application. Email [training@igccb.org](mailto:training@igccb.org) with any questions.

Sincerely,  
IGCCB Training Approval Committee

## Introduction

Thank you for your interest in providing training programs that support the IGCCB training requirements for its certifications and certificates. The IGCCB reviews and approves all types of training programs that meet our requirements for Continuing Education (CE). The purpose of this approval process is to maintain a high standard of training quality, across the globe, that promotes the most up-to-date and evidence-based information to all attendees and members.

We charge by the CE Hour depending on your membership (ICGC, ICOGS, IGDC, BACC, CLERGY LAY MINISTER) with the IGCCB. \$10 for non-members and \$7 for members. *For example: Clergy 24-hour course is \$16 when trainer is IGCCB or \$240 when trainer is not IGCCB certified.* There will be an opportunity of 2 renewals with one initial application before needing to reapply (every 3 years).

## Training Approval Requirements (Summary)

Please submit the following for review/approval:

- Course Title
- Course Description
- Presenter(s) Names and credentials
- Presenter(s) CV
- Language format (English, French, etc.)
- Course Length (1+, 15, 30, or 60 hours)
- Designated Certification or Certificate (ICGC, ICOGS, IGDC, Clergy)
- Training Objectives and Learning Outcomes
- Training Features
  - Video
  - Slides
  - Quizzes
  - Case formulation
  - Synchronous / Asynchronous (Instructor-led or Self-paced)
  - Homework and/or other project-based learning
- Completed Crosswalk to Training Outline for the certification or certificate
- Any other features or services provided (Study group, BACC meetings, etc.)
- Platform used for the course, if applicable
  - Examples include: Zoom, Thinkific, Teachable, Canvas
- Post-Test
- Course Evaluation that includes instructor evaluation and content evaluation

**IGCCB CONTINUING EDUCATION TRAINING PROGRAM  
INITIAL AND RENEWAL APPLICATION**

<b>APPLICANT INFORMATION</b>		
<b>Contact Name:</b>		
<b>Are you applying as the Trainer/Presenter?</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Are you applying on behalf of the Trainer/Presenter?</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No
Job Title:	Email:	
Phone:	<input type="checkbox"/> Work <input type="checkbox"/> Cell	
Is the Presenter a member of IGCCB? <input type="checkbox"/> Yes <input type="checkbox"/> No	What certifications does the presenter have?	<input type="checkbox"/> ICGC-I. <input type="checkbox"/> CLERGY <input type="checkbox"/> ICGC-II <input type="checkbox"/> BACC <input type="checkbox"/> IGDC
<b>ORGANIZATION INFORMATION</b>		
Organization Name:		Website:
Address:		
City/Town:	State/Province:	Zip:
Country:		
<b>TRAINING INFORMATION</b>		
<b>Course Title:</b>		
<b>Brief Course Description:</b>		
<b>Is this training:</b>	<input type="checkbox"/> Initial Application	<input type="checkbox"/> Renewal Application
<input type="checkbox"/> Virtual (online/webinar)	Start Date:	Platform/Software:
<input type="checkbox"/> In-Person	Training Date(s):	Location:
<b>Frequency of the training:</b>	<input type="checkbox"/> One-Time	<input type="checkbox"/> Recurring

<b>Training for designated Certification or Certificate:</b>		
<input type="checkbox"/> CLERGY LAY/MINISTER		
<b>Total hours/CEs:</b>	or	<input type="checkbox"/> 24
<b>REQUIRED PRESENTATION MATERIALS</b>		
<i>Please provide documentation from the following list in a separate document:</i>		
<input type="checkbox"/> Presenter(s) CV or Resume		
<input type="checkbox"/> Training Title and Description including educational offering (workshop, conference, webinar, etc.)		
<input type="checkbox"/> Training Objectives and Learning Outcomes		
<i>Training Features:</i>	<input type="checkbox"/> Video, slides <input type="checkbox"/> Quizzes <input type="checkbox"/> Case formulation and presentation <input type="checkbox"/> Homework and other project based learning	<b>Virtual Only:</b> <input type="checkbox"/> Synchronous (Instructor-Led) <input type="checkbox"/> Asynchronous (Self-Paced)
<b>Virtual Only:</b>	You will need to provide a guest account/login to the course for verification	
<b>If virtual, please provide a link to log into the course:</b>		
<input type="checkbox"/> Completed Educational Crosswalk Form (see Education Crosswalk form)		
<b>Language:</b>	<input type="checkbox"/> English	Other:
<input type="checkbox"/> Post-Test <input type="checkbox"/> Course Evaluation that includes instructor evaluation and content evaluation		
<b>TRAINING PROGRAM AGREEMENT</b>		
<i>Please initial each statement indicating that you are in agreement:</i>		
I/We agree to follow the IGCCB educational training outline in our program		
I/We agree to promote the importance of IGCCB certifications and certificates in the problem gaming and gambling fields.		
I/We agree to utilize trainers and presenters whose credentials and qualifications demonstrate expertise and knowledge in gaming and gambling disorders		

I/We agree that our trainers possess work experience that make them relevant to the topics they are presenting

**By initialing the statement above, and signing below, we agree to provide educational programming that upholds the IGCCB criteria for meeting the educational requirements of designated certificates and certifications.**

Electronic Signature:	Title:
Print Name:	Date:

### IGCCB CONTINUING EDUCATION TRAINING PROGRAM

#### APPLICATION FEE (choose one)

<input type="checkbox"/> \$7/CE x          hours (7 x 24 hours = \$168)	IGCCB Certified Professional
<input type="checkbox"/> \$10/CE x          hours (10 x 24 hours = \$240)	Non-IGCCB Professional

**Total:          amount included**

#### **PAYMENT**

Please provide name of authorized person that can pay invoice by debit/credit card. Invoice will be emailed to authorized person.

Authorized Person:

Email:

Electronic Signature:	Date:
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## International Clergy Lay Minister Training Outline (CLERGY) (24 hours)

Course Name:

Educational Topic	Location in the Training (PowerPoint, Exercise, Quiz, Video, etc.)	Additional Comments
1) BASIC KNOWLEDGE OF PROBLEM AND DISORDERED GAMBLING	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
A) History of Gambling and Definition of Gambling and Disordered Gambling	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
B) Subtypes of Gamblers	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
C) Stages of a Gambling Problem	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
D) Public Awareness and Perception of Gambling; Impact of Advertising	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
E) Cultural Influences	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
F) Gambling and Adolescents, Women, Seniors	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other

Educational Topic	Location in the Training (PowerPoint, Exercise, Quiz, Video, etc.)	Additional Comments
G) Suicide and Gambling	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
H) Spiritual Issues: Guilt, Shame,	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
I) Connecting/ Disconnecting with Reality and Responsibilities	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
2) GAMBLING AS ADDICTION	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
A) Similarities and differences with Substance Use Disorders	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
B) Co-occurring disorders	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
C) Etiology of a Gambling Problem: Models	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
1) Biological	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos

Educational Topic	Location in the Training (PowerPoint, Exercise, Quiz, Video, etc.)	Additional Comments
		<input type="checkbox"/> Other
2) Psychodynamic	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
3) Behavioral	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
4) Cognitive Behavioral	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
5) Social Learning	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
6) Addiction	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
7) Self-Regulation	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
8) Economic	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
D) Recovery Signs and Problems	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment



Educational Topic	Location in the Training (PowerPoint, Exercise, Quiz, Video, etc.)	Additional Comments
		<input type="checkbox"/> Videos <input type="checkbox"/> Other
E) Natural Recovery	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
F) Secrecy and Trust Dynamics	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
G) Spiritual Issues: Forgiveness, Trust, Doubt, Fear	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
H) Gambling Impact on the Family & Children	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
I) Gam-Anon Support	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
J) Financial Issues	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
3) ENGAGEMENT WITH GAMBLING DISORDER	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
A) Assessment and Screening	_____	<input type="checkbox"/> Powerpoint

Educational Topic	Location in the Training (PowerPoint, Exercise, Quiz, Video, etc.)	Additional Comments
		<input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
B) Stages of Change	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
C) Motivational Interviewing	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
D) Working with Family	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
E) Codependency and Enabling	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
F) Overview of Treatment	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
G) Social Costs	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
H) Concepts of Hope and New Life, Making Amends	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other

Educational Topic	Location in the Training (PowerPoint, Exercise, Quiz, Video, etc.)	Additional Comments
I) Twelve Step Recovery Program	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
J) Twelve Steps: Spiritual Implications and Responses	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
K) Operational Forces within the Twelve Steps	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
L) Steps Four and Five: Perspectives for the Clergy	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
4) PATHOLOGY OF GAMBLING AND RECOVERY	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
A) Dependency, Compulsion, Obsession	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
B) Gambling and the Brain	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
C) Cognitive Disorders	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos

Educational Topic	Location in the Training (PowerPoint, Exercise, Quiz, Video, etc.)	Additional Comments
		<input type="checkbox"/> Other
D) Personality of the Individuals with Gambling Disorders	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
E) Pathways Model	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
F) Gamblers Anonymous	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
G) Life, Meaning and Purpose	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
H) Framework for Recovery:	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
1) personal survival	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
2) self-reclamation	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
3) service to others	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment

Educational Topic	Location in the Training (PowerPoint, Exercise, Quiz, Video, etc.)	Additional Comments
		<input type="checkbox"/> Videos <input type="checkbox"/> Other
4) connection to community	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
I) Blessing: Defining Recovery	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
J) The Serenity Prayer: A Recovery-Resolution Model	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
K) Self-Help Recovery Groups in a Faith Community	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
L) Prevention Strategies and Outreach within a Faith-Based Setting	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other
M) Faith-Based Models for Addiction Ministries	_____	<input type="checkbox"/> Powerpoint <input type="checkbox"/> Exercises/ Activity / Assignment <input type="checkbox"/> Videos <input type="checkbox"/> Other

NOTE: 100% of this outline needs to be met if submitting for the entire 24 program hours