



Amarillo College
Criminal Justice
Intervention Programs
An Equal Opportunity Community College

Cognitive Behavioral *Change* Program

Course Description: This 16-hour program utilizes a researched and evidence-based curriculum to improve behavior through cognitive restructuring and social skills development. Facilitators place emphasis on empowering students to identify wrong thinking that so often leads to negative or criminal behavior and replace it with right thinking that results in positive behavior and outcomes. This program is centered on instruction and exercises in interpersonal problem solving. It will assist students to set goals and create positive attitudes and beliefs as well as to develop personal accountability and responsibility, control anger, provide substance abuse education and impulse control. It is appropriate as a "sanctions" course for those who violate their probation or parole but do not fit or may require something more intense than the standard programs for anger, theft, and money management, or it can be used as an "up-front" program to facilitate positive life changes from the beginning. It is also beneficial for those involved with the family and protective services system, the health and human services system, or anyone else needing or wanting to bring about fundamental change in their lives through an examination of their values, attitudes, beliefs and thinking patterns.

A *Home Study* version of this program is also available in either English or Spanish. Please contact our office for more information.

August 2010 – December 2010

Cost: The cost of this course is \$105. **Refunds or class transfers must be requested at least one day prior to the start of class.** After this period, students will be required to register and pay for another class.

Registration: Full registration instructions are located on the back of this form. **Students are required to register and pay prior to the first class. It is recommended that students register as early as possible, because classes reach maximum enrollment quickly.**

Enrollment Eligibility Notice: Students with outstanding obligations to Amarillo College may not be allowed to enroll in or complete a continuing education course until the obligations are fulfilled. Students who have received a Criminal Trespass Warning from Amarillo College will not be allowed to enroll in courses held on any AC campus unless the warning has been lifted.

Attendance: Students must be on time and attend all sessions in consecutive order. One make-up session may be allowed at the discretion of the instructor; an additional charge may be assessed for make-up sessions. Students are required to bring an adult translator with them if they have limited or no proficiency in the English language.

Questions: For questions regarding our programs, call (806) 356-3649 or (806) 356-3682 or e-mail ecwallace@actx.edu. Se habla español. You may also visit us online at www.actx.edu/intervention.

Any student, who because of a disabling condition may require some special arrangements in order to meet course requirements, should contact disAbility Services (SSC 119, Phone 371-5436) as soon as possible.

Course ID # 095594		
Location: AC West Campus, 6222 W. 9th, Bldg. C, Room 117		
Days	Dates	Times
Tuesday/Thursday	September 7 to September 23	6:00pm - 8:40pm
Note: This course is 16 hours in length and meets each Tuesday and Thursday night for 3 weeks.		

Course ID # 095595		
Location: AC West Campus, 6222 W. 9th, Bldg. C, Room 102		
Days	Dates	Times
Tuesday/Thursday	November 2 to November 18	6:00pm - 8:40pm
Note: This course is 16 hours in length and meets each Tuesday and Thursday night for 3 weeks.		

Online Registration

WebAdvisor is an online student services delivery system. The system allows students to:

- Search & register for classes
- Change class schedule
- Pay tuition & fees
- Review grades

Go to www.actx.edu, click on WebAdvisor, click on Continuing Education, click on Register and Pay for Continuing Education Classes. Select "Intervention Programs" under Topic Code and then click on Submit for a listing of classes.

E-mail: If you have questions related to a specific Continuing Education class, please send your questions to ContEd@actx.edu.

Mail Registration

• Complete the registration form, enclose check or credit card information, and mail to:

AMARILLO COLLEGE
REGISTRAR'S OFFICE
PO BOX 447
AMARILLO TX 79178

• No acknowledgement will be mailed.

FAX Registration

• Complete the registration form, include credit/debit card information, and fax to: Intervention Programs, (806) 354-6074.

• No acknowledgement will be mailed.

In-Person Registration

Payment for courses is due at time of enrollment. A place in the class will not be reserved if payment has not been made in full.

EAST CAMPUS – Student Activity Center – J Avenue, Amarillo, TX

9 a.m.-6 p.m., Monday through Thursday

8 a.m.-5 p.m., Friday

HEREFORD CAMPUS, Hereford, Texas – Student Service Center, 241 Ave. H, Hereford, TX

8 a.m.-7 p.m., Monday through Thursday

8 a.m.-5 p.m., Friday

MOORE COUNTY CAMPUS, Dumas, Texas – Student Service Center, 1220 E. 1st St., Dumas, TX

7:30 a.m.-10 p.m., Monday through Thursday

7:30 a.m.-4 p.m., Friday

WASHINGTON STREET CAMPUS – Student Service Center, 2011 S. Washington, Amarillo, TX

7 a.m.-7 p.m., Monday through Thursday

7 a.m.-5 p.m., Friday

WEST CAMPUS – Lecture Hall, 6222 W. 9th Ave., Amarillo, TX

8 a.m.-5 p.m., Monday through Friday

HOLIDAY/SUMMER HOURS

Please call 371-5000

Registration Form – Cognitive Behavioral *Change* Program

Course ID#: _____ **Beginning Date:** _____

Social Security Number: _____ **Date of Birth:** _____

Last Name: _____ **First:** _____ **MI:** _____

Current Address: _____

City/State/Zip Code: _____

Home Phone: _____ **Work Phone:** _____ **Cell Phone:** _____

County of Residence: _____ **Residency Status:** ___ Texas Resident ___ Out-of-State ___ Foreign Country

Gender: ___ Male ___ Female **Personal E-mail:** _____ **Business E-mail:** _____

Ethnic Origin: (Voluntary Information – Will not affect enrollment) ___ White ___ American Indian ___ Alaskan Native ___ Black
___ Asian/Pacific ___ Islander ___ Hispanic ___ International

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS COMPLETE AND CORRECT.

Date: _____ **Signature:** _____

Method of Payment: ___ Cash ___ Check ___ Money Order ___ Visa ___ Master Card ___ Discover ___ American Express

Credit Card #: _____ **Expiration Date:** _____

Authorized Signature: _____