



Anger Management for *Home Study*

Course Description: This researched and evidence-based course is equivalent to our 12-hour classroom course and is most often required for persons who have been convicted of and/or placed on probation for an assaultive offense. It is also appropriate for anyone who would like assistance in reducing stress, controlling emotions, or reducing aggressive behavior. This program is designed to help participants understand why people use violence, discover how attitudes can override values, learn how to identify and control strong emotions, learn how to develop a plan to alter present behavior, learn to gain better self-control, learn to walk away from confrontations, establish goal-directed behavior patterns, and make a firm commitment never to repeat as a criminal offender, if applicable.

The classroom course is usually the best option for learning this material and is recommended. However, there are circumstances (location/distance, health, work schedule, transportation, etc.) when the *Home Study* version is appropriate. To take the Anger Management for *Home Study* course, you must meet the conditions outlined on the reverse of this form.

August 2025 – December 2025

Cost: The cost of this course is \$95. There are *no refunds* once the *Home Study* workbook has been issued/mailed.

Registration: Registration must be handled directly through the Intervention Programs office using one of the methods listed below. Full registration conditions and registration form are located on the back of this form. **Students are required to register and pay prior to the *Home Study* workbook being issued or mailed.**

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.

Completion: Students must complete and return the *Home Study* workbook within 30 days of receipt of payment, or they will be required to register and pay again. A Certificate of Completion will then be mailed within two weeks.

Questions: For questions regarding our programs, call (806) 457-4452 or (806) 457-4468 or e-mail rrdominguez@actx.edu. Se habla español. You may also visit us online at www.actx.edu/intervention.

Read the Registration Conditions and complete the Registration Form on the back of this form, and then use one of the following accepted registration methods:

Mail Registration

- Complete the registration form, enclose check or credit/debit card information, and mail to:
AMARILLO COLLEGE
INTERVENTION PROGRAMS
PO BOX 447
AMARILLO TX 79178

FAX Registration

- Complete the registration form, include credit/debit card information, and fax to: Intervention Programs, (806) 322-9866.

In-Person Registration

- Complete the registration form and come to our office and provide payment in full at the address listed below:

FIRST RESPONDERS ACADEMY – 3891 Plains Blvd., Room 1007, Amarillo, TX
8 a.m.- 5 p.m., Monday through Friday

HOLIDAY/SUMMER HOURS
Please call 371-5000

Anger Management for *Home Study* - Registration Conditions and Registration Form

You must meet the conditions outlined below in order to register for this course.

At a minimum, to take the Anger Management for *Home Study* instead of attending the in-person group course, you must satisfy one of the first four conditions plus conditions #5 and #6.

SATISFY ONE:

- 1- You **are not** court-ordered to complete an Anger Management course; however, you want to take a course for your own benefit and of your own free will.
- 2- You **are** court-ordered or otherwise required to complete the Anger Management for *Home Study* version, **and** you have provided us with written verification.
- 3- You **are** court-ordered or otherwise required to take an Anger Management course, **and** you live more than 45 miles from Amarillo, **and** you have received and provided us with written permission to take the *Home Study* version.
- 4- You **are** court-ordered or otherwise required to take an Anger Management course, **but** you do not live more than 45 miles from Amarillo, **and** due to some other circumstance (health, work schedule, transportation, etc.) you have received and provided us with written permission to take the *Home Study* version.

PLUS:

- 5- You have or will **obtain a "coach"** to assist you in completing your workbook. The "coach" can be a family member, friend, co-worker, or any other individual age 18 years or older who will commit the necessary time and with whom you feel comfortable sharing your thoughts and feelings.
- 6- You agree to **complete and return the workbook** to Amarillo College Intervention Programs by mail or in person **within 30 days** of payment and registration.

Registration Form – Anger Management for *Home Study*

Self-verification (for all conditions):

I, _____, certify that I meet condition (circle one) 1, 2, 3, or 4 plus conditions 5 and 6 listed above and therefore qualify to take Anger Management for *Home Study*.

Signature: _____ Date: _____

Court-ordered/required verification (for conditions 2 - 4):

I, _____, certify that _____ meets condition (circle one) 2, 3, or 4 listed above and therefore has my permission to take Anger Management for *Home Study* in place of the in-person group course.

Signature: _____ Title: _____ Date: _____

Course ID# (for Office Use): _____ Date Mailed/Registered: _____

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 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 ☐ MasterCard ☐ Discover ☐ American Express

Credit/Debit Card #: _____ Expiration Date: _____

Authorized Signature: _____ Card Security Code _____