

State University of New York State University at Stony Brook

On the Recommendation of the Faculty and by Virtue of the Authority
vested in them the Trustees of the University have conferred on

Orange Auld

the Degree of

Master of Social Work

and have granted this Diploma as evidence thereof
Given at Stony Brook, in the State of New York, in the United States of America
on the twenty-first day of May two thousand and four.

Thomas J. Egan
Chairman of the Board of Trustees

T. R. Wootte
Chairman of the Council,
State University at Stony Brook

Frank L. Eyer
Chancellor of the State University of New York

Shirley Anne Kenny
President,
State University at Stony Brook

THE UNIVERSITY OF THE STATE OF NEW YORK
EDUCATION DEPARTMENT



BE IT KNOWN THAT

ONAJE MUID

HAVING GIVEN SATISFACTORY EVIDENCE OF THE COMPLETION OF PROFESSIONAL
AND OTHER REQUIREMENTS PRESCRIBED BY LAW IS QUALIFIED TO PRACTICE AS A

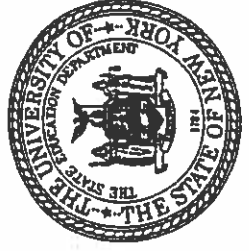
MENTAL HEALTH COUNSELOR

IN THE STATE OF NEW YORK

IN WITNESS WHEREOF THE EDUCATION DEPARTMENT GRANTS THIS LICENSE
UNDER ITS SEAL AT ALBANY, NEW YORK
THIS THIRD DAY OF JULY, 2006.

Thomas P. Miller
PRESIDENT OF THE UNIVERSITY
AND COMMISSIONER OF EDUCATION

LICENSE NUMBER
002580



Johanna Runcap-Pittier
DEPUTY COMMISSIONER
OFFICE OF THE PROFESSIONS

Daniel H. Smith
EXECUTIVE SECRETARY
STATE BOARD FOR
MENTAL HEALTH PRACTITIONERS

The University of the State of New York
Education Department
Office of the Professions
REGISTRATION CERTIFICATE

Do not accept a copy of this certificate

Certificate Number: 8759756

002580-1

Licenses Number:

MUID ONAJE
321 CLEARBROOK AVENUE
LANSDOWNE PA 19050-0000

is registered to practice in New York State through 11/30/2017 as a(n)
MENTAL HEALTH COUNSELOR

[Signature]
COMMISSIONER OF EDUCATION
[Signature]
DEPUTY COMMISSIONER
FOR THE PROFESSIONS

[Signature]
LICENSEE/REGISTRANT
EXECUTIVE SECRETARY

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The State of New York
Office of Alcoholism and Substance Abuse Services

Be it Known That

Onaje J. Muid

*Having given satisfactory evidence of fitness and having demonstrated
the basic knowledge, skills and professional competencies prescribed by
regulation, has been found duly qualified as a*

CREDENTIALLED ALCOHOLISM AND SUBSTANCE ABUSE COUNSELOR

by the State of New York



Arlene González-Sánchez
Arlene González-Sánchez
Commissioner

10444

Credential Number

Effective Date: **04/10/2013**

Expiration Date: **04/09/2016**

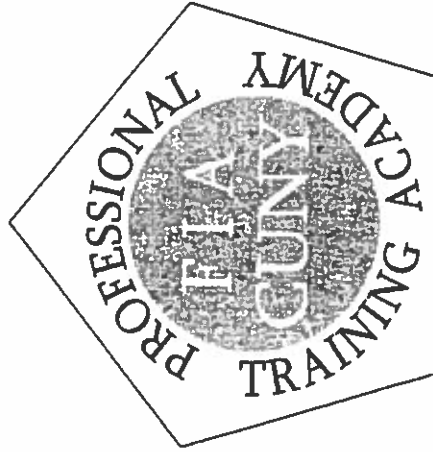
CERTIFICATE OF COMPLETION

Awarded to

Onaje Muid

For Successful Completion of the
Training Fundamentals for Trainer Series

FIA / CUNY Professional Training Academy



<i>[Signature]</i>	<u>1.22.04</u>
Senior Trainer & Curriculum Developer	Date
<i>[Signature]</i>	<u>1.22.04</u>
Trainer & Curriculum Developer II	Date

State of New York

Office of Alcoholism and Substance Abuse Services
Bureau of Talent Management and Performance Improvement
Learning and Development Unit

FACULTY MEMBER CERTIFICATE

Having completed a Train-the-Trainer program, and having demonstrated satisfactory performance as an instructor,

Onaje Muid

is hereby certified as a faculty member in good standing and is fully qualified to present the following course(s):

Cultural Competency in Substance Abuse Treatment & Prevention: The Consciousness Raising & Affective Component



Julia M. Fesko

JULIA M. FESKO

LEARNING AND DEVELOPMENT UNIT MANAGER

FACULTY NUMBER

11055

EXPIRATION DATE

03/02/2018