

Request for Continuing Education Program Approval

This form is used to request review of a CE program that a licensee or registrant plans to attend that is not already sponsored by an entity recognized by the Board.

**REVIEW THE CHECKLIST AT THE END OF THIS FORM

BEFORE COMPLETING TO DETERMINE IF YOU NEED TO SUBMIT THIS FOR BOARD REVIEW**

Contact Information:

Name of Licensee/Registrant:	License/Registrant#:	Email:	
Street Address:	City:	State:	Zip Code:

Potential CE Program Information:

Name of CE Program/Conference	Location of Training:	Dates of Training:	
Learning Objectives: (Please attach a conference brochure with this information as well)			
Name of CE Program/Presentation <i>(E=ethics; S=supervision)</i>	Presenter Name & Degree	Time Start	Time End
<i>*for programs or conferences with more presentations, please attach multiple pages with totals for each page</i>			

Total Hours Requested:	
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Category of Learning Determination:

Will any portion of this training be provided over distance?	YES	NO
<i>If yes, please answer the following questions:</i>		
Is the learning OR presenter experience provided via computer?	YES	NO
Is there LIVE (synchronous/real-time) interaction between the presenter and learner?	YES	NO
Is there required LIVE (synchronous/real-time) interaction between the learners?	YES	NO
Is there LIVE processing of presented material by the learner?	YES	NO

NDAC 66-03-01-04 Requirements:		
Is any of the content being provided to meet the content area of professional ethics, law, or jurisprudence (INDICATE CLEARLY ABOVE with E)	YES	NO
Is any of the content being provided to meet the content area of supervision (INDICATE CLEARLY ABOVE with S)	YES	NO
Category 1 Requirements:		
Is this a formal continuing education program offering as a course, workshop, professional psychology convention, conference, or institute?	YES	NO
Are Instructors and learners able to have real-time/synchronous interaction on a verbal level via in person or through video technologies.	YES	NO
BOTH ITEMS MUST BE YES FOR THIS TO BE CATEGORY 1 CE (1 hour per clock hour)	YES	NO
Category 2 Requirements:		
Is this a regularly scheduled postgraduate course offered by an accredited college or university that is relevant to the practice of psychology, industrial-organization psychology, or applied behavior analysis?	YES	NO
Is this course documented on a transcript?	YES	NO
BOTH ITEMS MUST BE YES FOR THIS TO BE CATEGORY 2 CE (One quarter hour of academic credit constitutes 10 CE. One semester hour of academic credit constitutes 15 CE)	YES	NO
Category 3 Requirements:		
Is this a spoken or written presentation at a formal professional meeting? CREDIT IS GRANTED FOR YEAR OF PRESENTATION (5 CE CREDITS PER ITEM)	YES	NO
Is this a paper published in a professional journal, or a book or an original chapter in an edited book in the area of psychology or a related field? CREDIT IS GRANTED FOR YEAR OF PUBLICATION (15 CE CREDITS per chapter or edited book; 20 CE CREDITS per published book).	YES	NO
Is this the initial year of teaching a graduate course within a higher education setting? CREDIT GRANTED FOR FIRST YEAR ONLY (20 CE CREDITS)	YES	NO
MAXIMUM OF 20 Category 3 CEs may be used during a renewal cycle.		
Category 4 Requirements:		
Is this a correspondence or online course, recording, or independent reading that includes an examination component?	YES	NO
Is there an obtained CE certificate indicating successful completion by the licensee or registrant?	YES	NO
BOTH ITEMS MUST BE YES FOR THIS TO BE CATEGORY 4 CE (A MAXIMUM OF 20 Category 4 CEs may be used during a renewal cycle.)	YES	NO

Documentation Required to accompany this application:

- Fully completed form

For Category 1 or 4 submissions:

- Copy of Program or Conference Brochure or Training Announcement that clearly indicates the following:
 - o Program description, content summary, and learning objectives
 - o Agenda of training times and statement of attendance requirements
 - o Presenters and their bios
 - o Location of the training (host sites, on-line program, etc)
- Copy of presenters' summary bios
- Copy of the CE certificate of completion or attendance (if already attended)
 - o Must include Name of Attendee
 - o Statement that Attendee attended the entirety of the program
 - o Title, Date, and Location of training
 - o Signature of Site Official confirming attendance/participation

For Category 2 submissions:

- Copy of the course syllabus
- Copy of the transcript (documenting class completion, if already completed)

For Category 3 submissions:

Presentation:

- Copy of Program or Conference Brochure or Training Announcement that clearly indicates the following:
 - o Program description, content summary, and learning objectives
 - o Agenda of training times and statement of attendance requirements
 - o Location of the training (host sites, on-line program, etc.)

Published Journal Article, Book Chapter, or Book:

- Copy of the citation in a journal database, such as Psych Info or copy of first page of article (journal article) or book title page and table of contents (book chapter/book)

Graduate Course Taught:

- Copy of the course syllabus

Submit application packet to:

nd state board of psychologist examiners

402 East Main Ave, Suite 5 - Bismarck, ND 58501

P. 701.214.5580 – F. 605.355.6961

boardoffice@ndsbpe.org

DECISION PATH FOR SUBMITTING THIS FORM

Check carefully to see who is hosting this training. Does one of the following listed appear anywhere on the brochure, training materials, advertisements, CE certificate, etc:

American Psychological Association	YES	NO
Canadian Psychological Association	YES	NO
North Dakota Psychological Association	YES	NO
ANY OTHER JURISDICTIONS Psychological Association	YES	NO
North Dakota Association on Behavior Analysis	YES	NO
Association of Behavior Analysis International	YES	NO
Behavior Analysis Certification Board	YES	NO
Minnesota Northland Association on Behavior Analysis	YES	NO
American Association on Intellectual & Developmental Disabilities	YES	NO

Please check ndsbpe.org website to see if this training has already been listed as approved during the reporting cycle for which you are reporting:

Ndsbpe.org lists this training as having been approved during my reporting cycle	YES	NO
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If you answered yes to any of the decision path questions:

DO NOT submit this form!

If you answered no, please continue back to the top of this form to complete in full and submit to the board for review.