

CE Organizational Pre-approval Program Application



The NCTRC Continuing Education Organizational Pre-approval Program provides for advance approval of professionally sponsored continuing education (CE) programs. The purpose of the CE Organizational Pre-approval Program is to enhance the opportunities for Certified Therapeutic Recreation Specialists (CTRS) to engage in professional training and education to assure continuing competence in the practice of recreational therapy. NCTRC provides CE Pre-approval of educational session content that is directly related to the NCTRC Job Analysis Knowledge Areas. All requests for CE Pre-approval from ATRA Chapter affiliates must go through the ATRA office. NCTRC will not accept CE Pre-approval Applications directly from ATRA Chapter Affiliates.

Sponsors of continuing education programs seeking NCTRC Pre-approval must adhere to the following conditions:

1. All organizations seeking NCTRC CE Organizational Pre-approval must verify adherence to the ANSI/IACET 2018 Standard.
2. Submit a completed CE Organizational Pre-approval Application Session Proposal form for each educational session at least four weeks prior to the continuing education event.
3. Pre-approved CE session content will not be reviewed after a continuing education opportunity has been already conducted.
4. Submit the appropriate fee for the entire review process and the number of sessions based upon a \$25.00 administrative fee and \$10.00 for each submitted session. All fees must be in U.S. funds and in one single payment.
5. Each continuing education session must be 60 minutes or longer. Sessions of less than 60 minutes will not be accepted by NCTRC, regardless of the content.
6. Academic coursework completed for continuing education can not be reviewed as a part of this process.
7. Prior to NCTRC official approval, organizations may post the following statement:
"NCTRC CE Pre-approval pending: all sessions may not have been approved by NCTRC"
8. Upon final NCTRC official approval, organizations may post the following statement:
"This session content is CE Pre-Approved by NCTRC"
9. Pre-approved CE session content will be valid for one (1) year for repeat trainings and workshops. Session title and content must be identical to qualify for extended Pre-approval.

APPLICANT INFORMATION

Organization Name:

Organizational Contact:

Mailing Address:

City:

State:

Zip:

Preferred Phone:

Email:

CE Provider:

ATTESTATION

I attest to have completed a full review of the ANSI/IACET standards for the attached continuing education event. I understand that if any information submitted is found to be false, the event session content will not be approved by NCTRC and this agreement will become null and void.

Signature *(handwritten or digital)*

Date

SESSION PROPOSAL

Program Title:

Program Dates:

Please complete a separate proposal for each individual session offered.

Title of Session (*descriptive of content; relate to NCTRC Job Analysis; 20 words or less*):

Session Description (*descriptive of content; relate to NCTRC Job Analysis; 150 words or less*):

Length of Session:

Learning Outcomes (*provide measurable learning outcomes for each session; provide NCTRC JA code*):

1.

2.

3.

Session Outline (*provide a detailed session outline of content and methodology*):

Will this session content be offered as a repeat CE opportunity during the coming year?

Yes

No

NCTRC DECISION

Session Approved: The session may be designated on program as *"This session content is CE Pre-Approved by NCTRC."*

Session Approved: (encourage speaker to make noted changes) *The session may be designated on program as "This session content is CE Pre-Approved by NCTRC."*

Session Denied: The session may be open to attendees, however the program must indicate *"This session content is **NOT** CE Pre-Approved by NCTRC."* This decision may be appealed with the submission of a modified proposal.

Amount of CE session content approved:

Date:

NCTRC

Credit Card Authorization Form

For your convenience NCTRC accepts Visa, MasterCard, American Express and Discover. Please complete the information below including signature and email, fax or mail to NCTRC.

Visa

MasterCard

American Express

Discover

Name as it appears on card:

Card Number:

Expiration Date:

Total:

By signing below I do hereby authorize NCTRC to charge \$
to the above Visa/MasterCard/American Express/Discover account.

Signature (*handwritten or digital*)

Date

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NCTRC is a member of the Institute for Credentialing Excellence (ICE) and the CTRS Credentialing Program is accredited by National Commission for Certifying Agencies (NCCA).

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