

## **NCBDC CONTINUING EDUCATION (CE) FORM**

This form can be used in either of two ways:

- (1) - The sponsor of an NCBDC or AIBD sanctioned educational event can enter the time, place and subject of the event and ALSO PROVIDE a list of all the NCBDC professional-level members attending.
- (2) - An individual NCBDC professional-level member can apply for CE hours for: a) any of the approved events or activities referred to in the NCBDC CE policy; or b) petition the CE committee for CE hours to an event or activity not specifically approved in the policy.

This form is to be filled out completely, providing as much information as possible, and mailed, faxed, or emailed to the National NCBDC offices at 2962 Saklan Indian Drive, Walnut Creek, CA 94595, fax #: (925) 287-8225, email address: information@ncbdc.com.

**SPONSORS:** Please attach a legible list of the names of all NCBDC or AIBD professional-level members who attended this event or activity. State-sponsored meeting/event attendance sheets must be submitted by a state society officer to the NCBDC National Office by fax or mail.

**INDIVIDUALS:** Please attach proof of attendance/participation (preferably one page only) to this form when submitting. A certificate (if any), receipt or check copy, or other proof of attendance should accompany this form. If you are applying for CE hours for non-sponsored activities, such as writing an article or serving on a board /community committee/ agency, please provide a copy of the article or a verification of appointment letter from the board/ committee/agency. If you are requesting continuing education hours for activities not specifically approved within the policy, submit a written petition stating your reasons why you think this activity should be accepted for CE hours and include copies of all information you think will be needed to make a determination by the NCBDC Continuing Education Committee.

### **SPONSORED EVENT OR ACTIVITY**

DATE HELD: \_\_\_\_\_ EVENT LOCATION (CITY & STATE): \_\_\_\_\_

EVENT SPONSORER: \_\_\_\_\_

TITLE OF EVENT OR ACTIVITY: \_\_\_\_\_

LENGTH OF EVENT (in hours): \_\_\_\_\_

BRIEF DESCRIPTION OF MATERIALS (handouts) DISTRIBUTED: \_\_\_\_\_

BRIEF DESCRIPTION OF EVENT OR ACTIVITY: \_\_\_\_\_

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### **PARTICIPANT**

NAME OF PARTICIPANT: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

### **STAFF USE ONLY**

Date validated and entered into database: \_\_\_\_\_ CE hours allowed: \_\_\_\_\_

PETITION RESPONSE: date of CE Committee decision: \_\_\_\_\_ Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_

Reasons: \_\_\_\_\_

Committee chairperson's signature: \_\_\_\_\_

Date appealed to board of directors: \_\_\_\_\_ Decision upheld? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Secretary's signature: \_\_\_\_\_