



Single Program Application

This application is for live continuing education events only. Submission of a completed application does not guarantee approval. Application fees are nonrefundable. CCE will not pre-review any application or program. Incomplete applications will not be considered. Application or program management cannot be delegated to another entity.

Title of Program: _____

Program Website: _____

Name of Organization: _____

Name of Authorized Representative: _____

The applicant must designate an authorized representative to communicate and cooperate with CCE concerning all matters related to the requested single program approval.

Date of Program: _____

Is this a multisession program? Yes No

Number of Sessions: _____

If not submitting entire conference for review, application should clearly identify the sessions.

Organization Information

Street Address: _____

City, State, ZIP Code: _____

Telephone: _____ Email Address: _____

Number of individual, reviewable sessions or workshops for review: _____

CCE will email its application decision.

Program Size	Definition	Fee	Submission Requirements
Small Program	17 or fewer sessions or workshops for review	\$300	Application must be received 60 days prior to program date
Large Program	18 or more sessions or workshops for review	\$500	Application must be received 90 days prior to program date

Applications received less than 30 days prior to the program date, regardless of program size, are not eligible for approval. Application fees are nonrefundable and nontransferable.

OFFICE USE ONLY	REF.#1: _____	BATCH #1: _____
	DATE: _____	AMOUNT: _____

Approval Requirements

Providers seeking to offer single programs for CCE continuing education credit must satisfy all requirements, including all application requirements related to program content, instructors/presenters, and provider activities.

Single program providers can offer CCE credit only for live event programs, including real-time interactive programs and in-service programs presented in person or by electronic devices that permit the participant to communicate and interact with the presenter(s).

- (a). Each single program and application must be reviewed and receive written approval by CCE prior to being offered for CCE continuing education credit. If approved by CCE, the program may be offered for CCE credit for the duration of one year following the approval date, conditioned upon no material change to the program and compliance with all policy requirements.
- (b). Following the expiration or termination of a single program approval, a provider may reapply for approval. In order to maintain uninterrupted approval, the provider must submit the application at least 60 days prior to the program approval expiration date, including all required and supporting materials, and all fees and costs related to the single program application.
- (c). CCE retains the sole authority and discretion to approve, reject, or condition a single program for continuing education credit.

Single Program Eligibility Requirements

In order to qualify for single program approval, a provider must satisfy the following program eligibility requirements:

- (a). The provider satisfies all requirements, agreements, and instructions.
- (b). The content and quality of the program satisfy and are consistent with all CCE requirements, agreements, and instructions.
- (c). The program presenters satisfy all requirements, agreements, and instructions, including **rules concerning presenter qualifications, knowledge, and performance.**
- (d). The provider designates an authorized representative to communicate and cooperate with CCE concerning all matters related to the requested single program approval.
- (e). The provider submits a completed and accurate single program application to CCE including all required information, materials, and fees. All such application materials become the property of CCE, and application fees are not refundable.

Application Requirements

Incomplete or unsigned applications will not be reviewed. Full and correct payment must accompany the application. **Do not send payment separately.**

1. Title of Program: _____
 2. Program Date(s): _____
 3. Target Audience: _____
 4. The maximum number of CE hours available for this program is:
(**Do not use the term CEU.**) _____
 5. Briefly describe the facility in which the program will take place: _____

 6. Is the facility ADA compliant? Yes No
 7. Does the provider maintain policies concerning program fees, refunds, and participant cancellation? Yes No
Does the provider maintain a written and published policy concerning the review and resolution of program
 8. participant complaints and disputes related to provider programs? Yes No
 9. Describe the provider's procedure for verifying attendance:
-
10. Has the provider ever been denied approval as a continuing education provider or had a program denied approval?
 Yes No
If yes, by which organization(s) was the provider or program denied?

Include with your application:

- A completed copy of Attachment A.
- A copy of the proposed brochure or flyer advertising the program that includes all information required:
 - Program registration requirements.
 - Program content description and learning objectives for all sessions.
 - The name and qualifications of each program presenter or author.
 - The number of CE hours offered for completion of the program.
 - The provider contact information, including mailing address, telephone number, email address, and website address.
- A copy of the agenda for the program.
- A Presenter Qualification Form for each presenter and a curriculum vitae, résumé, or other documentation to verify education, experience, and/or training. The curriculum vitae or résumé must include the presenter's degree and field of study. A spreadsheet may instead be submitted for a large program provided it includes all required information and fits on ledger-sized paper.
- A copy of the evaluation form that will be used by participants.
- A copy of the proposed certificate of completion that will be distributed to participants. (See sample.)

Continued on next page³.

I attest that I have read and understand this application and that the information provided in this application and the attachments is complete, true, and accurate.

Name of Authorized Representative:

_____ Date: _____

Email application to: CCEBusiness@cce-global.org. Upon receiving the application, you will receive instructions for submission of materials and payment.

Submission of application does not guarantee approval. Applications are reviewed in the order that they are received. Applications received less than 30 days prior to the program date are not eligible for review.

Email CCEBusiness@cce-global.org with questions.

Single Program Application: Attachment A

For multi-session programs, a completed copy of Attachment A must be submitted for each session you wish to have reviewed. If your program is not multi-session, one copy of Attachment A can be submitted.

Title of Program: _____

Presenter(s): _____

Include a Presenter Qualification Form for each presenter and identify who presented what material.

Target Audience: _____

Number of CE Hours Available: _____

Describe the program content:

Learning Objectives

1.

2.

3.

4.

Include brochures, agendas, and other promotional materials for the program.

Presenter Qualification Form

In order for a provider to offer and issue CCE continuing education credit, the program must satisfy the following requirements: the subject matter must be directly and primarily related to a CCE content area, and the presenter of the program must qualify as a presenter for the subject matter presented. Qualifying programs must be taught by presenters who possess appropriate qualifications.

Presenter Name: _____

Current Position Title: _____

Title of program or session/workshop that he or she will present: _____

Session Number (if applicable): _____

The subject matter of this program is directly and primarily related to the following CCE content area(s):

Select the presenter category appropriate for this individual (check one):

- Category 1 Presenter
- Category 2 Presenter
- Category 3 Presenter

Education

	Degree	Major or Field of Study	Institution	Year
Master's				
Doctorate				
Other				

Training Relevant to Topic Presented/Authored:

Professional Licenses or Certifications:

A curriculum vitae, résumé, or other documentation to verify education, experience and/or training must be attached to this form for each presenter.

Sample Single Program Certificate

The sample certificate submitted with your application should meet the below:

Live Program Document of Completion Requirements

The Provider must prepare and issue a document of completion (certificate or letter) to each participant completing a qualifying live, real-time program offered for CCE credit. Such certificate or letter must include the following information:

- (a). The name and contact information of the Provider.
- (b). The title and date of the live program.
- (c). The name of the participant to whom the CCE hours are awarded.
- (d). The number of CCE hours awarded to the named participant.
- (e). The name and signature of an authorized representative of the Provider.

A certificate or letter verifying program completion must be made available by the Provider to eligible participants in a timely manner after the conclusion of the program. Such certificates or letters must not be made available prior to the end of the qualifying program.



Single Program Application Payment Authorization

Name of Organization: _____

Name of Authorized Representative: _____

If you wish to submit this application via email, DO NOT complete the credit card information on this page.

Check this box and email your application to ccebusiness@cce-global.org. We will reach out to you via email with instructions for submitting payment.

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