



# National Certification Council for Activity Professionals

*Enriching Lives Through Person-Centered Engagement*

3015 Upton Drive, Suite 103, Kensington, MD 20895 USA | (757) 552-0653 | [info@nccap.org](mailto:info@nccap.org)

## CONTINUING EDUCATION (CE) APPLICATION:

NEW COURSE APPROVAL, COURSE RENEWAL, AND “APPROVED CE EDUCATOR” STATUS

Please print, complete and email this application with payment to: [info@nccap.org](mailto:info@nccap.org)

### REQUIREMENTS

1. All educational courses intended to meet the Continuing Education (CE) requirements of NCCAP Certifications and Specializations will receive a NCCAP CE approval number upon approval.
2. **New Course.** All new education courses require that **all** information and documentation be submitted along with payment of a new course fee based on the number of clock hours:
  - A. 1-8 clock hours: **\$57**
  - B. 8.5-16.5 clock hours: **\$77**
  - C. 17-25 clock hours: **\$127, plus** hourly plan and detailed summary of content with learning objectives.
  - D. 25.5 or more clock hours: **\$177, plus** hourly plan and detailed summary of content with learning objectives.
3. **Renewal.** Courses approved the previous year require completed application and any documents that have been changed since previous submission along with payment of the **\$50.00** renewal fee.
4. **Fast Track.** To obtain a CE approval number for an educational course within 72 business hours upon submission requires an additional **\$55 Fast Track Fee.**  
\*\*Educational courses submitted less than 30 days before the course date are subject to a **\$55 Fast Track Fee.**\*\*
5. **Approved CE Educator Status.** NCCAP offers the Approved CE Educator status to help advance and promote CE courses with the following benefits:
  - A. Use of the NCCAP “Approved CE Educator” emblem for marketing and promotion
  - B. Posting on NCCAP website to include Educator’s name, organization, contact details, and the course direct link.
  - C. On organization’s website please ensure all NCCAP approved courses are available on one webpage so NCCAP can post up the direct link for the Activity Professionals.
  - D. Approved Educator fee: **\$50.00** per year, renewable.

### POLICY FOR USE OF “APPROVED CE EDUCATOR” EMBLEM

As an “Approved CE Educator”, NCCAP grants a limited one-year right to use the NCCAP Approved CE Educator Emblem to promote the course(s) for which you have obtained NCCAP CE approval.

The Emblem must not be altered, modified or changed in any way and must not be used to misrepresent your affiliation with NCCAP as solely an “Approved CE Educator”.

Contact NCCAP with any questions: [info@nccap.org](mailto:info@nccap.org).



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Select which is applicable:

\_\_\_ **New CE Application:** Complete entire form. Previously approved courses that have not been delivered for more than one year are required to submit a new application.

\_\_\_ **Renewal:** Complete entire form and submit any documentations that have been changed.  
Course Approval Number: \_\_\_\_\_

\_\_\_ **Approved CE Educator:** I wish to become an "Approved CE Educator" and will submit my credentials, proof of education level and curriculum vitae.

\_\_\_ **Fast Track Fee:** I would like my Approval Number within 72 business hours.

**\*Please state how you would like to be represented on the Approved CE Educator list:**

Course Instructor: \_\_\_\_\_ Title(s): \_\_\_\_\_

Organization: \_\_\_\_\_

Is this course in person/online: If in person, City \_\_\_\_\_ State \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

NCCAP Approved Course Link: \_\_\_\_\_

## REQUIRED INFORMATION

Date of this Application \_\_\_\_\_

Name and Title of Educator: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Title of Educational Course: \_\_\_\_\_

Requested Number of Clock Hours: \_\_\_\_\_ Body of Knowledge Topic(s): \_\_\_\_\_

Location of Educational Course: \_\_\_\_\_

Delivery Method (circle all that apply):

Lecture , Hands-On , Demonstration , Live Webinar , On-Demand Course, Other: \_\_\_\_\_

How Will Records Be Maintained? \_\_\_\_\_

How Will Certificates of Attendance Be Distributed? \_\_\_\_\_

Date(s) of Educational Course: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Will this course be repeated in 12 months? YES/NO



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## THE FOLLOWING INFORMATION MUST ACCOMPANY THIS APPLICATION

1. Purpose and Learning objectives of the course
2. Publicity tool and/or Brochure of the course
3. Course Time Outline including breaks, lunch and/or non-instructional time
4. Educator(s) name and a brief description of credentials and qualifications
5. Copy of certificate of attendance presented to participants
6. Evaluation tool to be used by participant
7. 3 evaluations from unbiased party stating total educational hours **(ON DEMAND ONLY)**  
SEE PAGE 4 FOR DOCUMENTATION OF COURSE HOURS SAMPLE
8. Post-Test with a minimum of 10 questions and answer key **(ON DEMAND ONLY)**

## DECLARATION

I have reviewed and will comply with NCCAP Continuing Education policies and will communicate these requirements to all instructors, sponsors and participants to assure compliance with NCCAP standards and requirements. Understanding that *payment of application fee does not guarantee that approval will be granted and is used to cover the administrative cost of processing, reviewing and evaluating the application.*

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## PAYMENT

1. Credit Card: VISA, MASTERCARD, or DISCOVER

I authorize NCCAP to charge my credit card for charges associated to my application:

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

CVS on back of card: \_\_\_\_\_

Zip Code associated with this card: \_\_\_\_\_

The NCCAP Education Committee will review this application and attachments to determine that NCCAP standards are met.

