

New Mexico Continuing Education (CE) Sponsor Approval Application

The New Mexico Chapter of the American Physical Therapy Association (NMAPTA), through the continuing education committee, is an entity authorized by the New Mexico Physical Therapy Licensing Board to review and approve continuing education (CE) courses, programs and activities that contribute to the participant's professional development in the practice of physical therapy.

****Please note that this process applies to speakers/sponsors seeking approval of a course to be presented with CE credits awarded to participants.*** Individuals should contact the New Mexico State Licensing Board at <http://www.rld.state.nm.us/b&c/ptb/> for all other CE inquiries, other than the current listing of approved courses. These may be found at www.nmapta.org.

A. Obtaining and Submitting an Application

1. An application form and instruction sheet for review of a course or activity for CE credit may be obtained and submitted by the course sponsor (provider) to www.nmapta.org.
2. All applications and supporting information about a course must be submitted in English.
3. Sponsors should submit applications sixty days prior to presentation but may, under special circumstances submit an application for review after the course is taught.

B. Application Packet

Required Documentation: The following items must be attached to the completed application for processing. Failure to provide these items will result in the application being incomplete and the process will be delayed or application rejected. Application fees are non-refundable.

1. A copy of the most recent application form with all requested information supplied.
2. A course description and learning objectives for the course.
3. A detailed course schedule that outlines course content and breaks
4. A course brochure, if available.
5. Identification of the target audience.
6. Identification of the instructional level of the course: basic, intermediate, advanced or multi-level.
7. A summary statement that describes how the content of the course is relevant to physical therapy.
8. A description of the faculty or presenter qualifications to teach the course content.
9. A method of evaluation of the course or program.
10. A mechanism for verifying participant's attendance and course completion. Example: a certificate of completion.
11. Bibliography of at least five references from peer-reviewed journals.

C. Application Fees

1. Reasonable and customary fees for reviewing and processing applications for CE credit are established and collected by the NMAPTA. Current application fee per course is \$45.00, payable to NMAPTA.
2. Application and fees are NONREFUNDABLE.

Submit the completed application form, application fee and all attachments to:

New Mexico Physical Therapy Association

CE Course Approval

PO Box 327

Alexandria, VA 22313

Fax: 703/706-8575

www.nmapta.org

You may also send pdf versions of all materials to newmexico@apta.org.



New Mexico Continuing Education Sponsor Approval Application

Section 1: Sponsor Information

Sponsor Name

Contact Person

Mailing Address

City State Zip Code

Telephone FAX

E-mail Address Website

Co-Sponsor Name (if applicable)

Mailing Address

City State Zip Code

Telephone FAX

Section 2: Program Information

Has this program been previously approved? YES NO
If "yes" under what approval number

Type of Program Approval:

Traditional Onsite Course

Home-Study
(text, video or web-based)

Other

Title of Program

Location of Program

City, State

Home Study
Via Satellite

Web Based
Other

Date(s) and Time(s) of Program

(The course will be valid through the end of the calendar year it is approved)

Dates for Traditional Onsite Course
(attach schedule if presented on multiple dates)

Ongoing or Home Study
(specify dates for which you are requesting approval)

Proposed Continuing Education Units

(Program schedule must be attached to verify contact hours and requested continuing education units)

Contact hours excluding breaks: _____ hours, divided by 10 = _____ CE hours

Presenter (or Home Study Course Author) Qualifications

(Programs must be presented by a licensed health care provider, or by a person with appropriate credentials and/or specialized training in the field. Program providers are prohibited from self-promotion of programs, products and or services during the presentation of the program.)

Note: Any physical therapist or physical therapist assistant instructing an educational seminar, which includes hands-on demonstrations, must hold a current New Mexico license or apply for a temporary license. This temporary license may NOT be used to practice physical therapy for any other purposes than for the continuing education program for which it was issued. (Instructor application available on the New Mexico Physical Therapy Licensing Board's web page under "Forms")

Please list qualifications below or attach, as necessary:

Instructional Level	Basic	Intermediate	Advanced	Multi-level
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Learner Objectives

(Program must be easily recognizable as pertinent to the physical therapy profession and in the areas of clinical application, clinical management, behavioral science, or science. Learner objectives must be clearly written to identify the knowledge and skills the participants should acquire during the course.)

Please list course objectives below or attach, as necessary:

Instructional Methods

(Examples: lecture, live or taped demonstrations, laboratory, reading of printed material and illustrations, etc).

Please list course description below or attach, as necessary. Also, please attach a bibliography of at least 5 references from peer-reviewed journals.

Evaluation Procedures

(Describe how the presenter will determine whether the course objectives have been met. Examples: written test, observation of laboratory work, oral questions, etc. The procedures used to assess a licensee's participation and attainment of objectives must be described).

Please list course evaluation procedures below and attach samples.

******Please review the cover page to ensure you have attached all required documentation. Failure to provide these items will result in the application being incomplete and the process will be delayed or application rejected.******

Section 3: All Applicants Must Complete This Section

Application must be accompanied by a check, money order or electronic credit card payment in the amount of \$45.00, payable to the **New Mexico American Physical Therapy Association**. Purchase orders are not accepted.

NOTE: The application fee is not refundable even if approval is denied.

I certify that the information provided in this application is true and correct.

Signature

Date

Printed Name
Title

Office use only

Date Rcvd

Tracking Number