

**APPENDIX B - APPLICATION FOR CONTINUING EDUCATION CO-SPONSORSHIP  
WITH THE NORTH CAROLINA PSYCHOLOGICAL ASSOCIATION**

Please email to: [karen@ncpsychology.org](mailto:karen@ncpsychology.org)

1. Organization or Individual \_\_\_\_\_
2. Address \_\_\_\_\_
- City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
- Phone \_\_\_\_\_ E-Mail \_\_\_\_\_
- Contact Person \_\_\_\_\_

3. Name of NCPA Member who will be a part of the planning process: (please print)

\_\_\_\_\_  
**(NCPA requires that at least one NCPA member be an integral part of planning this continuing education activity, sign this application, and assure adherence to NCPA policies on continuing education.)**

4. Date(s) of the Activity \_\_\_\_\_
5. Location(s) \_\_\_\_\_

6. Status of Group: \_\_\_\_\_ Not-for-Profit\* \_\_\_\_\_ For-Profit \_\_\_\_\_ Governmental  
\*Copy of IRS tax letter must accompany application to be recognized as a not-for-profit organization.

7. Title of Program(s) \_\_\_\_\_  
If only one offering, give that title; if more than one give overall conference title then individual presentation titles in #8.

8. PROGRAM CONTENT – FOR EACH PRESENTATION, PLEASE PROVIDE THE FOLLOWING:

- a. Title of each presentation
- b. The narrative description of each presentation – see Appendix E for examples (if there is more than one presentation, a narrative is needed for each presentation)
- c. The learning objectives for each presentation – There should be three to four objectives for a one - to - three hour program; five to six objectives for a four - to - seven hour program. (see Appendix C)
- d. The name of each presenter, including degree, discipline, current professional information and any other information that will be in your promotional material (See Appendix E)
- e. If a program is intended to meet ethics credit, please indicate this on information you are submitting (see Appendix S)
- f. For each program indicate learning level: Basic, Intermediate or Advanced (see Appendix D)
- g. The number of credits to be awarded for each session (1 credit per hour)
- h. A minimum of 3 references within the past 10 years that relate to the subject of the presentation **must be submitted. Example:** Freeman, A. J., Youngstrom, E. A., Youngstrom, J. K., & Findling, R. L. (2016). Disruptive Mood Dysregulation Disorder in a Community Mental Health Clinic: Prevalence, Comorbidity and Correlates. *Journal of Child & Adolescent Psychopharmacology*. doi:10.1089/cap.2015.0061

9. Number of CE Hours applying for (list each presentation if separate CE offered): \_\_\_\_\_

10. \_\_\_\_\_ Date \_\_\_\_\_  
Signature of NCPA Member accepting responsibility for compliance with the requirements of the NCPA CE Manual

11. \_\_\_\_\_ Date \_\_\_\_\_  
Signature of Contact Person for Applicant who agrees to comply with the requirements of the NCPA CE Manual

**Submit to:** NCPA, Attention: Sally Cameron - 1004 Dresser Ct, Suite #106, Raleigh, NC 27609 fax: 919/872-0805 phone: 919/872-1005  
email: [karen@ncpsychology.org](mailto:karen@ncpsychology.org)