

Standards for Approval of Continuing Education Courses **Forms to be Used by *Provider* of CE Course**

(A) Guidelines for Board Approved Program

Continuing Education Courses shall be approved by the North Carolina Acupuncture Licensing Board based on the following:

A formally organized course which has:

- (1) Content related to the scope of practice of acupuncture or a course which has content related to any health service and is relevant to the practice of acupuncture.
- (2) The method of instruction is adequate to teach the content of the course, program, or activity
- (3) The credentials of the instructor(s) indicate competency and sufficient training, education and experience to teach the specific course, program or activity.
- (4) Each credit hour of the course program, or activity is equal to no less than 50 minutes of actual instruction or training.
- (5) Applications must be submitted to the Board at least 60 days before the course to be approved is scheduled to be given to the public

The Board reserves the right to approve the amount of CEU's to be given, based on the content of the course.

(B) Applications for Approval of Specific Continuing Education Programs

Application for approval of a continuing education program shall be submitted on a Board approved form no less than 60 days in advance of the course to be presented, and must contain all of the following:

- (1) The name & CV of the instructor(s) & license of individual(s)
- (2) Title of the course
- (3) Course description & outline which contains a specific list of topics and denotes the time devoted to topics
- (4) Number of credit hours requested
- (5) Goal of the course
- (6) A copy of promotional or advertising materials
- (7) Course date and location
- (8) Name, address & phone number of sponsoring organization/individual
- (9) \$50.00 Fee

(B) Responsibilities of providers of CEU's:

- (1) Comply with the Continuing Education Regulations
- (2) Keep an attendance record which shows the name and signature for each acupuncturist taking the course
- (3) Obtain written evaluations from each participant at the end of each program they present
- (4) Maintain the attendance record and written evaluations for a 4 year period
- (5) The NCALB reserves the right to audit the records of the provider at any time and can withdraw approval if the provider does not conform to these stated responsibilities

*****A sample of a Participant Evaluation and a Certificate of Completion Form are enclosed.*****

**North Carolina Acupuncture Licensing Board
Request for Continuing Education Unit (CEU) Course Approval Form**

On-Site Education

Name of Provider or Organization _____

Address _____

Name of CE Coordinator _____

Phone _____ Fax _____

Course Title _____

Name of Lecturer(s) _____

Requested No. of CEUs _____

Course Date(s) and Location(s) _____

Has the course been approved by the Acupuncture Board within the past two years? Yes No
(All courses must be approved each time the provider is offering it)

If yes, is the current course content, number of CEUs, and lecturers identical as presented in the past? Yes No

Will there be any publicity or advertisement for these courses? Yes No

If yes, please submit a copy of the publicity/advertisement for the Board's review with refund policy clearly stated.

By signing below, I affirm, under penalty of perjury, under the laws of the State of North Carolina, that I have read and will comply with the continuing education regulations and that all statements contained in this application are true and correct.

Signature _____ Date _____

Print Name _____ Title _____

For Acupuncture Board's Use Only				Approve	Deny
Course within 60 day timeframe	Yes	No			
Course Application Complete	Yes	No	Authorized Signature _____		
\$50.00 Fee Enclosed	Yes	No	Date _____		

ONSITE COURSE OUTLINE

Name of Course _____

Please provide the course outline and include information on how this course relates to the scope of practice of acupuncture in North Carolina. Use additional sheets if necessary.

ONSITE COURSE SCHEDULE

Please provide a breakdown of topics that will be covered during each day of the onsite course. When counting the number of CE units, use 50 minutes for each CE unit (lunches may not be considered for CE units).

Starting and ending times:

From - To

Topics to be covered during this time

_____ - _____

_____ - _____

_____ - _____

_____ - _____

_____ - _____

_____ - _____

_____ - _____

_____ - _____

_____ - _____

_____ - _____

Participant Evaluation Form

CE Provider Name

Date(s) of Course

Course/Seminar Title

Instructor Name

Participant's Name

Date of Evaluation

Did this course meet its stated objectives?

Did the instructor demonstrate adequate knowledge of the course subject?

Do you feel that you will be able to apply what you have learned today to your practice?

Would you recommend this course to other licensed acupuncturists?

Additional Comments:

Certificate of Completion

This is to certify that _____ has successfully completed

_____ Hours of Approved Continuing Education

Provider Name: _____

Course Title

Completion Date

Course Location

Instructor's Signature

Provider's Authorized Signature

Date

Date

NORTH CAROLINA LICENSED ACUPUNCTURISTS ARE REQUIRED TO RETAIN THIS CERTIFICATE FOR AT LEAST FOUR (4) YEARS FROM THE DATE OF COMPLETION OF THIS COURSE.