

CONTINUING EDUCATION (CE) PROVIDER APPLICATION

INFORMATION & INSTRUCTIONS

- **REVIEW BOARD STATUTE:** Review Continuing Education (CE) Provider requirements under Minnesota Statute Chapter 148E.145, at the Board of Social Work website. The Board pre-approves CE Providers rather than programs. CE activities are not required to be pre-approved by the Board, but must meet Board statutory CE requirements.
- **VOID APPLICATION:** Complete the application form. The CE Provider Application must be submitted with the required fee, at least 30 days prior to the program date, and is valid for one year from the date of approval. ***Incomplete applications or applications not accompanied by the correct fee are void, and will be returned and will result in delayed processing.***
- **FEES:** Submit a check or money order, made payable to the Minnesota Board of Social Work, with this application. Purchase orders will only be accepted from other state agencies. ***All fees submitted to the Board are nonrefundable.***

CE PROVIDER INFORMATION

- All information is classified as public data

PROVIDER/ORGANIZATION NAME:

(no acronyms)

CE PROVIDER NUMBER:

(if previously issued)

CONTACT PERSON:

ADDRESS:

CITY:

COUNTY:

STATE:

ZIP CODE:

PHONE:

EMAIL ADDRESS *(optional)*:

WEBSITE *(optional)*:

FEES & CE HOURS

- Calculate total number of CE hours needed for one year from date of submission of application.
- Calculate individual 60-minute clock hour within program. One CE hour = 60 minutes of education. For example, four concurrent one-hour sessions is equal to four CE hours.
- Subtract lunch or dinner breaks which do not qualify as CE hours.
- Applications may be submitted for additional CE hours if necessary.

\$ 50: 1 to 8 clock hours

\$400: 33 to 48 clock hours

\$100: 9 to 16 clock hours

\$600: 49 or more clock hours

\$200: 17 to 32 clock hours

Total CE hours: _____

ACKNOWLEDGMENT

Attestation of CE Provider:

1. I agree to comply with CE Provider requirements under the Board's Statute, Chapter 148E.145.
2. I attest that materials presented will promote the Board's standards of practice (MS 148E.195-148E.240), contribute to the practice of social work (MS 148E.010), benefit practicing social workers, will not be procedural or self-development and that presenters will be qualified.
3. I agree to provide a certificate of attendance to each participant.
4. I understand CE Provider approval is valid for one year and may be revoked if programs fail to meet requirements.
5. I will not advertise approval until written confirmation from the Board is received.
6. I understand the Board may audit programs offered. I agree to maintain the documentation specified in MS 148E.145, subdivisions 4 and 5, for three years following the end of a program and will submit the documentation, if audited.

SIGNATURE:

DATE: