



PROVIDER APPLICATION FOR CONTINUING EDUCATION UNITS

APTA Michigan, Inc.
 140B Purcellville Gateway Dr., Suite 120, Purcellville, VA 20132
 517-234-5040 / contact@aptami.org / www.aptami.org

CEU Provider Fee Schedule:	Provider Application Fee:										
<p>The annual fee varies based on the total number of courses offered within a calendar year from the date of CEU provider status acceptance.</p> <table border="1"> <thead> <tr> <th style="text-align: center;">Courses Held:</th> <th style="text-align: center;">FEE</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">1-5</td> <td style="text-align: center;">\$495</td> </tr> <tr> <td style="text-align: center;">6-20</td> <td style="text-align: center;">\$995</td> </tr> <tr> <td style="text-align: center;">21-50</td> <td style="text-align: center;">\$1500</td> </tr> <tr> <td style="text-align: center;">51 +</td> <td style="text-align: center;">\$2500</td> </tr> </tbody> </table> <p><i>Please use CEULocker for individual course applications.</i></p>	Courses Held:	FEE	1-5	\$495	6-20	\$995	21-50	\$1500	51 +	\$2500	<p>The non-refundable application fee is payable and due to the <u>APTA Michigan</u> per the fee schedule.</p> <p>For credit card payments, please call 517-234-5040 for a secure transaction.</p> <p>A receipt will be emailed to the applicant.</p>
Courses Held:	FEE										
1-5	\$495										
6-20	\$995										
21-50	\$1500										
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Information Required for Provider Approval

To be eligible for “APTA Michigan CEU Provider” status, please submit:

- Applicant Information
- Course Documentation (see checklists below) on three (3) finalized CEU courses
- Provider fee

Submit all documents to: contact@aptami.org

Failure to include requested documentation WILL result in the application being delayed or rejected.

Applicant Information

Organization or Applicant Name: _____

Contact Person: _____

Mailing Address:

Street: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Contact phone: _____

Contact Email Address: _____ Website: _____

Method of Payment: ___ Check (check# _____) ___ Credit Card (Please call)

Course Documentation Requirements

You may submit documentation for either Live/On-Site or Home Study / Distance Learning / On-line CEU courses. Only finalized courses that have been granted CEU's are applicable. In progress courses are not eligible. All required items for each course MUST be included for application to be complete. Only courses offered by the company/organization applying to be a CEU Provider are applicable.

Required information/documentation for Live/On-Site courses

1. Course Name
2. Course Location
3. Course Date(s), time(s), contact hours
4. Course schedule
5. Presenter's qualifications (See ADDITIONAL INFORMATION below)
6. Brochure or promotional materials for course
7. Program or Course Description: Must include how/why course content is directly related to physical therapy and how content improves a participant's knowledge or skills in physical therapy
8. Course educational materials – PowerPoints, handouts, video clips, etc.
9. Course learning objectives (See ADDITIONAL INFORMATION below)
10. Bibliography (See ADDITIONAL INFORMATION below)
11. Completed post-course evaluations by participants
12. Completed course sign-in sheets/verification of attendance
13. Course certificate of completion
14. Any waivers or declarations associated with course (if applicable)

Required information/documentation for Home Study / Distance Learning / On-line course

1. Course Name
2. Course Location
3. Course Date(s), time(s), contact hours Presenter's qualifications (See ADDITIONAL INFORMATION below)

4. Brochure or promotional materials for course
5. Program or Course Description: Must include how/why course content is directly related to physical therapy and how content improves a participant's knowledge or skills in physical therapy
6. Course educational materials – PowerPoints, handouts, video clips, etc.
7. Course learning objectives (See ADDITIONAL INFORMATION below)
8. Bibliography (See ADDITIONAL INFORMATION below)
9. Completed post-course evaluations by participants
10. Completed course sign-in sheets/verification of attendance
11. Course certificate of completion
12. Post-test with summary of scores
13. Explanation on the means by which the number of hours necessary to complete the course was determined
14. Any waivers or declarations associated with course (if applicable)

ADDITIONAL INFORMATION

- **Presenter Qualifications:** For each presenter, instructor or laboratory assistant involved in this course/program, submit a descriptive statement or an abbreviated curriculum vita or resume that specifically identifies the professional background of each presenter and what qualifies him/her to teach or provide *this course*. Descriptive statements for each presenter should be 1-2 paragraphs in length; an abbreviated CV or resume should be no more than 2 pages.
- **Learning Objectives:** Must be clearly written to identify the knowledge and skills the participants should acquire during the course. (State what the participants will be able to do at the conclusion of the course, such as identify, describe, discuss, explain, compare and contrast, analyze, apply, integrate, etc.)
- **Bibliography:** Submit a list of at least five (5) written works/references (i.e. textbooks, articles from professional journals or other sources), published within the last 7-10 years, that support the content of this course/program. For textbooks, include the title, authors(s), date of publication, and name/ location of the publisher. For journal articles, include the title of the article, author(s), name and volume of the journal, year of publication and page numbers of the article.