

**APPLICATION FOR ACCREDITATION  
OF A CONTINUING EDUCATION PROGRAM**

Note: This certification form, together with the required information referenced therein, shall be submitted to the Committee. If no objections are raised by a member of the SCPEAC within 10 working days of receipt, the continuing education program shall be considered accepted. If an objection is raised, a teleconference meeting shall be scheduled, with appropriate public notice, as soon as reasonably possible, to review the application.

Applications are due no later than 30 days prior to the first scheduled presentation of a program or class. The Committee will consider extenuating circumstances where the 30 day deadline cannot be met.

**1. Name and address of organization providing or sponsoring the orientation program:**

- a. Organization Name: \_\_\_\_\_
- b. Address: \_\_\_\_\_
- c. City: \_\_\_\_\_
- d. State: \_\_\_\_\_  
Zip Code: \_\_\_\_\_
- e. Telephone: \_\_\_\_\_
- f. Email: \_\_\_\_\_

**2. Contact Information:**

- a. Name of Contact Person: \_\_\_\_\_
- b. Title: \_\_\_\_\_
- c. Telephone: \_\_\_\_\_
- d. Email: \_\_\_\_\_

**3. Information on orientation program:**

- a. Title of Program:  
\_\_\_\_\_
- b. Date(s) and Location(s) of Program:  
\_\_\_\_\_
- c. Brief description of the program and its content:  
\_\_\_\_\_

**4. Method of presentation (check all that apply. All sessions must have a Coordinator present):**

- a. Presentor(s) in room with participants

- b. Live presentation via close circuit TV, video conferencing, or similar; Coordinator present
- c. Videotape or CD/DVD presentation; Facilitator present
- d. Webinar or similar; Coordinator present
- e. Other (describe) \_\_\_\_\_

**5. Description of materials to be distributed (check/fill in all that apply):**

a. Powerpoint handout: <input type="checkbox"/>	number of slides:
b. Other handouts: <input type="checkbox"/>	total pages:
c. CD/DVD: <input type="checkbox"/>	
d. Other (describe) _____	
e. None: <input type="checkbox"/>	

**6. When are materials distributed?**

- a. Sent before the program:
- b. Handed out at the program:
- c. Other (describe) \_\_\_\_\_

**7. Required attachments (5 copies distributed as described below):**

- a. Course description and outline including estimated time per section
- b. Brochure, if available
- c. Course Presenter(s) and credentials (include brief resumes and qualifications)
- d. Copies of all handouts and course materials
- e. Evaluation Form and method of evaluation (each program must be evaluated)

**8. Instruction Time:**

- a. Indicate the total minutes of instruction time: \_\_\_\_\_

**Note:** Breaks, meals and introductions should not be counted. A reasonable period of Q and A should be included and counted.

**9. Method of Advertisement:**

- a. Describe the ways in which you intend to let potential attendees know about this orientation program:  
\_\_\_\_\_

**10. Certification. By Submitting this application, the applicant agrees to:**

- a. Allow in-person observation, without charge, of the Program by the SCPEAC Committee members. Any food, travel or lodging costs will be the responsibility of the Committee member(s).

b. The applicant acknowledges that its approval for this Program may be withdrawn for violations of the regulations or failure to comply with the agreements and representations contained herein and as may be required by the SCPEAC.

i. Name of Organization: \_\_\_\_\_

ii. Name of Representative: \_\_\_\_\_

iii. Title: \_\_\_\_\_

iv. Phone: \_\_\_\_\_

v. Email: \_\_\_\_\_

vi. Signature: \_\_\_\_\_

vii. Date: \_\_\_\_\_

**Application and all Materials may be submitted in one of the following means:**

1. Electronic submission to each of the committee members listed below via email; or
2. Hardcopy via U. S. Mail, 1 copy each to each committee member; or
3. Electronic submission of the application via email to all committee members, and submit hardcopy supporting materials via U.S. Mail to each member, if materials not available electronically.
4. Please cc all applications to the Chairman's assistant, Krista Wiedmeyer at [kristaw@hiltonheadislandsc.gov](mailto:kristaw@hiltonheadislandsc.gov)

To access committee members email and postal addresses visit the link below:

<http://www.scstatehouse.gov/SCPEAC/members.htm>