



CONTINUING EDUCATION CREDIT APPROVAL REQUEST

- Complete one form for each program. Additional information may be requested to support the request.
- Applications are reviewed and approved by CACEA’s education committee.
- CACEA won’t approve program provider applications retroactively. Incomplete applications won’t be reviewed.
- For prior approval, the applicant must complete and [email CACEA](mailto:info@cacea.ca) the form at least 10 days prior to the program.
- For post approval, the member must complete and [email CACEA](mailto:info@cacea.ca) within 20 days after the program.

Applicant (<i>Choose one</i>)			CACEA Member	CEC Provider
NAME:		PHONE:		EMAIL:
Continuing Education Provider				
INSTITUTION / ORGANIZATION:				
PROGRAM CONTACT PERSON:				
ADDRESS:				
CITY:		PROV/STATE:		CODE/ZIP:
PHONE:		EMAIL:		WEBSITE:
Program Information (<i>OPTION: Provide marketing, agenda and speaker information as a separate document or additional pages</i>)				
TYPE OF PROGRAM: WEBINAR WORKSHOP SEMINAR CONFERENCE OTHER (<i>Please specify</i>):				
LOCATION: (<i>If online provide link</i>):				
PROGRAM TITLE(S) (<i>List all</i>):				
PROGRAM DATE(S) (<i>List all</i>):			HOURS OF EDUCATION CONTENT:	
PROGRAM LEARNING OBJECTIVES:				
BRIEF DESCRIPTION OF PROGRAM CONTENT:				
PRESENTER(S) (<i>Name, Qualification / Position and Affiliation</i>):				
By signing this form, I agree the information provided is correct				
PRINT NAME:		SIGN:		DATE:
FOR OFFICE USE ONLY				
APPROVED BY:		APPROVED CREDITS		DATE:

