**ARIZONA PSYCHOLOGICAL ASSOCIATION (AzPA)  
PROGRAM PROPOSAL FOR CONTINUING EDUCATION CO-SPONSORSHIP  
Arizona Psychological Association • 1800 E Ray Rd, Ste A106 • Chandler, AZ 85225**

**(480) 675-9477 • FAX (480) 935-5270**

AzPA co–sponsorship indicates that the program offered is considered to have met criteria for continuing education activities as defined by the American Psychological Association.

Continuing education in psychology consists of planned educational activities intended to further education and training of psychologists for the enhancement of psychological practice, education, administration, and research.

Continuing education program co–sponsorship is provided only for a specific activity or program. It does not indicate endorsement of any organization by AzPA. Unless specified in a written agreement, it also does not involve any financial obligation for AzPA. AzPA reserves the right to not co–sponsor any given program.

\*\*All applications for co-sponsorship must be received 60 days before the program date. All sections of the application must be completed fully for consideration.\*\*

**SECTION ONE:** **SPEAKER and PROGRAM INFORMATION**

Speaker(s): Click here to enter text.

Organization: Click here to enter text.

Phone: Click here to enter text.

Email: Click here to enter text.

Speaking Event (*Ex: AzPA Convention*): Click here to enter text.

Date: Click here to enter text.

Location of Event: Click here to enter text.

Presentation Title: Click here to enter text.

Number of Credits Requested: Click here to enter text.

Contact Person (if different from speaker): Click here to enter text.

Please check in which ways you feel you have expertise and competency to teach your topic:  
Relevant educational experience such as holding a doctorate in Psychology   
Previous teaching experience Years of clinical experience Publications in relevant content areas Evaluation forms from previous programs Personal reference by an AzPA Member

Target Audience (check all that apply):  
Psychologists Social Workers Marriage & Family Therapists Mental Health Counselors  
Students in related fields Other

Program Level: Choose one.

Program Delivery Format: Classroom (in person) eTraining/Homestudy Other (please specify):

Click here to enter text.

**SECTION TWO: CONFLICT OF INTEREST, SPEAKER DISCLAIMER**

**SPEAKER CONFLICT OF INTEREST STATEMENT:**

I do not have any commercial interest in this program or presentation nor any information that could be construed as conflict of interest.

I have commercial interest in this program or presentation and information that could be construed as conflict of interest. If yes, please explain:

Example: *I am the founder of a commercial-based product which could be used in clinical treatment.*

Click here to enter text.

**PROGRAM DISCLAIMER:** Speakers must include in their handouts/presentation a statement describing the accuracy and utility of the materials presented, the basis of such statements, the limitations of the content being taught, and both the most severe and the most common risks. Please see the example below. You may modify this example so it pertains to your presentation.

Example: *The interventions used in this program are for educational purposes. While application of these interventions is encouraged, other factors could contribute to the outcomes when applied in clinical practice.*

Click here to enter text.

**SECTION THREE: PROGRAM DESCRIPTION**

**PROGRAM DESCRIPTION:** Please provide a brief program description that includes an explanation of how the references provided below relate to the subject matter of your program.

Click here to enter text.

**REFERENCES:** Program references must be in APA format. Must include a minimum of three references from peer-reviewed journals. References must not be older than ten years. **Additional references can be submitted as an attachment.**

**APA Format Journal Example:**

Pettifor, J., Sinclair, C., & Falender, C. A. (2014). Ethical supervision: Harmonizing rules and ideals in a

globalizing world. *Training and Education in Professional Psychology*, 8(4), 201-210.

<https://doi.org/10.1037/tep0000046>

1. Click here to enter text.
2. Click here to enter text.
3. Click here to enter text.

**LEARNING OBJECTIVES:** Rather than a description of topics to be covered, learning objectives should clearly define what the participant will be able to demonstrate in regards to knowledge gained and/or skills acquired as a result of having attended the program. Appropriate objectives employ observable, behavioral action verbs and are stated in **measurable** terms, e.g. “describe **2** methods…”, “define **3** terms…”, “identify **3** outcomes demonstrating the efficacy of EMDR.” Appropriate verbs can be found in Bloom’s Taxonomy. See General Guideline #1 (page 4) for reference. For programs of six hours or less please provide three objectives.

**As a result of participating, the attendee will be able to:**

1. Click here to enter text.
2. Click here to enter text.
3. Click here to enter text.

*For programs of seven to eight hours, please provide five to six objectives.*

1. Click here to enter text.
2. Click here to enter text.
3. Click here to enter text.

**SPECIFIED CRITERION:** Please select the single most relevant criterion.

Program content focuses on application of psychological assessment and/or intervention methods that have overall consistent and credible empirical support in the contemporary peer reviewed scientific literature beyond those publications and other types of communications devoted primarily to the promotion of the approach.

Program content focuses on ethical, legal, statutory or regulatory policies, guidelines, and standards that impact psychological practice, education, or research

Program content focuses on topics related to psychological practice, education, or research *other than* application of psychological assessment and/or intervention methods that are supported by contemporary scholarship grounded in established research procedures.

Please explain how the content of your program supports the chosen criterion.

Click here to enter text.

**DIVERSITY STATEMENT:** Describe how your program respects and attends to diversity in its content and the application of concepts presented. Explain which diverse populations are addressed reflected in and drawn from your title, program description, learning objectives and references. Diversity includes but is not limited to culture, gender, sexual orientation, racial, ethnic, disability, age, religion or socioeconomic differences. **Please use the example below to fill in the blanks with the aspects of diversity reflected in your presentation**.

*The presentation content respects and attends to cultural, individual and role differences, specifically related to* Topic of presentation *within* Specific populations *as evidenced by the title, program description, learning objectives and references.*

**SECTION FOUR: ADDITIONAL ITEMS NEEDED**

**With this application, please submit the following:**

* Speaker CV
* Program Schedule
* Evaluation Form: Please use the template on page 5 and fill in the highlighted information.

**Within one week of program approval, please submit your registration link and a brochure (electronic, screenshot, or hard copy) with the following information stated:**

* Learning objectives;
* A description of the target audience and the instructional level of the activity (introductory, intermediate, or advanced);
* Schedule;
* Cost, including all fees and the refund/cancellation policy;
* Instructor credentials, including relevant professional degree and discipline, current professional position, and expertise in program content;
* The number of CE credits offered for each activity;
* A clear indication of any activities within a program that are not offered for CE credit (ex: lunch);
* APA approval statement with logo as seen below. **Please note, no reference to APA or AzPA CE’s may be posted on any marketing materials until you have received approval from AzPA.**



Arizona Psychological Association is approved by the American Psychological Association to sponsor continuing education for psychologists. Arizona Psychological Association maintains responsibility for this program and its content.

**After the conclusion of the program, please submit the following:**

* A narrative summary of the evaluation forms
* A report containing the total number of participants and the percentage of attendees who were psychologists
* A list of participants (names and emails) requesting continuing education certificates, who have returned their evaluation form.
* A scanned copy of the sign-in sheet.

**FEES**

* The Arizona Psychological Association assesses a non-refundable fee for co-sponsoring continuing education programs. The fee for a single day workshop is $150.00. The fee for a multi-day workshop is $250. **Applications received less than 60 days prior to the event will be assessed an additional $100 fee.**
* In addition to the application fee, there is a $15.00/participant charge for AzPA to issue Continuing Education certificates to the participants. Continuing Education certificates will not be prepared until the fees are received by AzPA.
* Homestudy CE certificates will not be prepared until post-test exam with 80% or above passing is provided. For more information about the homestudy CE participant certificate charge, please contact the AzPA office.
* If a sponsoring association establishes a discounted registration fee for its members to attend the program, AzPA expects the same discount to be made available to AzPA members.

Program Title

Date

Presented By

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Content** | **Strongly Disagree** | **Disagree** | **Neutral** | **Agree** | **Strongly  Agree** |
| Content level appropriate | 1 | 2 | 3 | 4 | 5 |
| Content consistent with objectives | 1 | 2 | 3 | 4 | 5 |
| **Speakers** |  |  |  |  |  |
| Knowledgeable in content | 1 | 2 | 3 | 4 | 5 |
| Clarity/effectiveness of content | 1 | 2 | 3 | 4 | 5 |
| Visual aids/oral effectiveness | 1 | 2 | 3 | 4 | 5 |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **As a result of participating, I am able to:** | **Strongly Disagree** | **Disagree** | **Neutral** | **Agree** | **Strongly  Agree** |
| Objective 1- written exactly as is in program application. | 1 | 2 | 3 | 4 | 5 |
| Objective 2- written exactly as is in program application. | 1 | 2 | 3 | 4 | 5 |
| Objective 3- written exactly as is in program application. | 1 | 2 | 3 | 4 | 5 |
| Objective 4- written exactly as is in program application. | 1 | 2 | 3 | 4 | 5 |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Learning** | **Strongly Disagree** | **Disagree** | **Neutral** | **Agree** | **Strongly  Agree** | **Does Not Apply** |
| This presentation included learning materials and interventions, which addressed culture, gender and sexual orientation, racial, ethnic, disability, age, religion or socioeconomic differences. | 1 | 2 | 3 | 4 | 5 |  |
| Gained information that can be applied to my practice. | 1 | 2 | 3 | 4 | 5 |  |
| Gained information that can be applied to my personal or professional goals. | 1 | 2 | 3 | 4 | 5 |  |
| I learned a great deal as a result of this CE program. | 1 | 2 | 3 | 4 | 5 |  |

**Comments:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Please note: This program offers* # Credits offered *CE credits for psychologists. Full attendance is required to receive credit; variable credit for partial attendance may not be awarded based on the APA guidelines. Participants will receive a certificate for* # Credits offered *hours of CE credit only after submitting a signed evaluation. The speaker(s) do NOT have access to this form, your comments are confidential. Cosponsor is responsible for ensuring confidentiality of the identities of the responders.*