



# EDUCATION APPROVAL APPLICATION

---

## ORGANIZATION: ONLINE TRAININGS

### DIRECTIONS – READ CAREFULLY

*This application is for organizations seeking approval of online trainings they offer. Individuals seeking education approval for recertification need to complete the Individual Education Approval Application for Recertification found at [www.vacertboard.org](http://www.vacertboard.org).*

**ON-DEMAND:** Online trainings that professionals may take at any time. Depending on content and number of trainings submitted, review and approval may take up to 60 days.

**LIVE WEBINARS:** If you are submitting an online training that has a live component for approval, it must be submitted at least 30 days prior to the scheduled date.

### REQUIREMENTS FOR EACH TRAINING SUBMITTED FOR APPROVAL

1. \$65 per course. (Unless VCB Provider.)
2. Summary of the training, goals and objectives and a detailed schedule. Educational content submitted for approval, must be focused on evidence - based and best practice content that is well established and consistent with the educational domains of those certified.
3. Description of methods used to ensure attendance and engagement throughout.
4. Description of strategies used to mitigate learner fatigue.
5. List of references/citations used to develop the training content.
6. Copy of PowerPoint and handouts used for the training.
7. Copy of posttest to ensure learner understanding of the material presented with clear pass/fail requirements.
8. Brief description of how the hours were determined.
9. CV or Resume of trainer(s) unless they have been previously approved in the last 12 months.
10. Copy of the Evaluation Form.
11. A draft of any marketing material.

### REQUIREMENTS FOR THE ORGANIZATION

1. Provide a certificate of completion to each participant. The certificate must have the participant's name, the exact title of the training listed on application, name of the organization, the date of the training and the total number of hours awarded to each participant. Do not change the title or date of the training without notifying VCB in writing. You must indicate on the certificate that the total hours awarded for the training are "VCB Approved Hours" (example: "VCB Approved for 6 Hours").
2. A participant list must be submitted to VCB quarterly that includes the name and email address or full address if there is no email address to VCB must be submitted. VCB may randomly select participants to inquire about the quality of the training.
3. Your organization may not advertise that a training is "pending VCB approval."
4. You must maintain participation sheets for three years from training date of all VCB approved trainings.

**VCB RESERVES THE RIGHT TO APPROVE OR DENY EDUCATION BASED ON A FULL REVIEW OF CONTENT AND INSTRUCTION.**

## EDUCATION APPROVAL APPLICATION ONLINE TRAININGS

Form can be completed and saved. You may then print the appropriate pages to submit to VCB.

### TYPE OR PRINT LEGIBLY

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Organization: \_\_\_\_\_

*Please list the Organization or Company Name who is responsible for the training.*

Website: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Email: \_\_\_\_\_

*Please list the person who will be responsible for submitting trainings to VCB.*

## TRAINING INFORMATION

Title: \_\_\_\_\_

*The title on your certificate of completion must reflect the exact wording above.*

Date of Training: \_\_\_\_\_ Location: \_\_\_\_\_ Total Hours: \_\_\_\_\_  
*City, State Exclude breaks, meals, etc.*

Name(s) and Credential(s) of Instructor(s): \_\_\_\_\_

## PAYMENT INFORMATION: \$65 FEE MUST ACCOMPANY APPLICATION

**PAYMENT (CHECK ONE):**  Check  Money Order  VISA  MasterCard  Discover  American Express

*Checks & Money Orders made payable to VCB*

Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Sec. Code: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Name on Card: \_\_\_\_\_

Billing address: \_\_\_\_\_

Email address for receipt (*credit card only*): \_\_\_\_\_

## TO SUBMIT YOUR APPLICATION, CHOOSE ONE OF THE FOLLOWING:

- **EMAIL:** [info@vacertboard.org](mailto:info@vacertboard.org) *NOTE: Only PDFs are acceptable. VCB does not accept photos of applications.*
- **FAX:** 717-540-4458
- **MAIL:** VCB: 298 S. Progress Avenue | Harrisburg, PA 17109

*Please allow 5-10 business days for review and processing of your application.*

To confirm receipt of your application, or check on the status, you must email [info@vacertboard.org](mailto:info@vacertboard.org).