

EAA CE Activity Application

Due Date: All documents and Fees must be received a minimum of 75 days prior to event start date.

Select Type CEUs:

ASHA Only

AAA Only

Both ASHA and AAA

(Fees will vary based on selection. See page 3 & 4)

Contact Info:

Name _____ Email: _____ Tele: _____

Organization/company offering CE activity: _____

Address: _____

(For mailing of CE information/correspondence)

(City)

(State)

Location of the activity: _____

Beginning date of activity: _____ Ending date of Activity: _____

Total CEUs offered: _____ Total Hours offered: _____

(60 minutes or 1 contact hour = 0.1 CEU, time does not include breaks)

Activity Title (not to exceed 60 characters): _____

Description of activity (not to exceed 300 characters): _____

Email this document and all supporting documents to mjoseph@robertcraven.com

Instructional Level:

Introductory – assumes little/no familiarity with the area.

Intermediate – assumes general familiarity with the area

Advanced – assumes thorough familiarity with the area

Various – single level cannot be determined; multiple sessions

Content Code: Professional Related

Type of Activity (check only one):

Workshop

Seminar

Conference

In-service

Journal Group

Study Group

Teleconference/Webinar

Independent Study

Subject Code (check only one):

1010 Fluency Disorders - Assess and Interv

1020 Voice Disorders - Assess and Interv

1030 Motor Disorders of Speech - Assess & Interv

1040 Dysphagia - Assess and Interv

2010 Speech Science

3010 Lang Disorders - Assess & Interv

3030 Lang Dis:Aphasia/Acquired Neurogenic & Cogn.

3040 Language Disorders - AAC

3050 Language Disorders - Articulation

4010 Language Science

5010 Audiology - Assessment

5020 Audiology - Habilitation/Rehabilitation

5030 Hearing Assistive Technology

5040 Industrial Audiology/Hearing Conservation

6010 Hearing Science

7010 Service Delivery assoc with Sp/Lang/Hearing

7015 Pre-profess Education Assoc. w/ Sp/Lang/Hearing

7020 Education/Training issues in Sp/Lang/Hearing

7025 Regulatory Issues in Sp/Lang/Hearing

7030 Cultural & Linguistic Diversity in Educ. & Public Policy

7040 Psycho-social Issues in Assess & Interv.

7050 Leadership & Mgmt in Profess Practice Setting

7060 Patient Safety and Prevention of Medical Errors

8010 Microcomputer and Technology

9010 Speech-Language Conferences with Multiple Sessions

9015 SLP Self Study or Journals

9020 Audiology Conferences w/ multi sessions

9025 Audiology Self Study or Journals

9030 Audiology and SLP Conferences with multiple sessions

9035 Audiology and SLP Self Study or Journal

9040 Review Courses for National Exam in SLP or Audiology

Needs Assessment: Check all that apply:

Interviewed key individuals

Surveyed sample population

Conducted focus group(s)

Other _____

Instructor/Speaker Disclosure: Indicate the method you will use to disclose to participants the proprietary interests or affiliation of each instructor/speaker:

- Announcement by instructor/speaker
- Announcement by individual introducing the instructor/speaker
- Printed information distributed to participants prior to activity (attach sample)

Requirements for satisfactory completing/award of CEUs:

- Attendance (describe method you will use to verify attendance or provide an example)
- Attainment of learning outcomes (describe method you will use or provide an example)

Course Content Disclosure

- This program does not provide promotional information about a product or service.
- This program does provide promotional information about a product or service.
- A Content Disclosure statement is provided in the promotional brochure.

Speaker/Planner Disclosure

- This program did not receive financial or nonfinancial support for the speaker/planner.
- This program did receive financial or nonfinancial support for the speaker/planner. Sample disclosure(s) to participants is provided.

Completion of the Program Planner/Instructional Personnel Relationship Disclosure Form

- Disclosure form was completed by the Speaker/Instructor and is enclosed.
- Disclosure form was completed by the Planner(s) and is enclosed.

Course Financial and In-Kind Support Disclosure

- This program did not receive financial or in-kind support to hold this event.
- This program did receive financial or in-kind support to hold this event. Sample disclosure(s) to participants is provided.

Provide the following items in a word document (Must be received a minimum of 75 days prior to the event date)

Abstract(s) and Speaker Bios. Include speaker's name, affiliation and a brief description of qualifications.

Learning Outcomes: Provide a minimum of 3. (Multiple day events, please inquire for quantity) Describe the skills, knowledge and/or attitudes (learning outcomes) participants will be able to demonstrate as a result of this activity. These must be measurable such as: participants will be able to: demonstrate, describe, identify, list, etc.

Assessment of Learning: Describe the method(s) you will use to assess the learner outcomes. Include sample form(s) if applicable.

Time Ordered Agenda: A time ordered agenda that lists the activity's schedule by time periods including content, instructional personnel, etc.

If course is a webinar (distance learning) and AAA is requested: Provide three (3) multiple choice questions that attendees will be required to answer. Provide answer sheet to EAA Office. Attendee forms must be returned with all other final documents.

Promotional Material: Attach the draft brochure or information you will use to advertise and promote this activity. The final published brochure must be forwarded as soon as available. Ensure that the promotional brochure/information contains the appropriate disclosure statements as described below and in the EAA Guidelines for content, financial/in-kind support, and speaker/planner.

Attendee Program Evaluation Form : Please include an area for attendees to "list 3 things learned during this event"

Disclosure Document: (Blank form provided) Required for each presenter and program planner. Note: Presenter must indicate if they are receiving an honorarium or travel support. They do not need to indicate the amount being paid.

Event Fees

Payment Selection:

Checks Enclosed (Mail to: EAA, 700 McKnight Park Drive, Suite 708, Pittsburgh, PA 15237)
 Credit Card Indicate card type: Visa MasterCard Discover

Credit Card Number _____
 Expiration Date _____
 CID Number located on the back of the card _____

Billing Address for Credit Card Listed

Authorized Signature: _____

Payment Schedule by Event Type:

ASHA - Only Event		
1) ASHA Application Fee (Check Payable to ASHA)	\$325	Due with application
2) EAA Set-up Fee (Check Payable to EAA)	\$450	Due with application
3) EAA Per Attendee Fee (Check Payable to EAA) Based on professional attendees. Fee should not be assessed on parents or students in attendance.	\$20 per attendee Note: \$15 per attendee if the event organization is a member of EAA.	Due immediately after event Note: Minimum payment is \$200

AAA – Only Event		
1) AAA Application Fee (Check Payable to EAA)	\$55	Due with application
2) EAA Set-up Fee (Check Payable to EAA)	\$450	Due with application
3) EAA Per Attendee Fee (Check Payable to EAA) Based on professional attendees. Fee should not be assessed on parents or students in attendance.	\$20 per attendee Note: \$15 per attendee if the event organization is a member of EAA.	Due immediately after event. Note: Minimum payment is \$200

ASHA and AAA		
1) ASHA Application Fee (Check Payable to ASHA)	\$325	Due with application
2) AAA Application Fee (Check Payable to EAA)	\$55	Due with application
3) EAA Set-up Fee (Check Payable to EAA)	\$600	Due with application
4) EAA Per Attendee Fee (Check Payable to EAA) Based on professional attendees. Fee should not be assessed on parents or students in attendance.	\$20 per attendee Note: \$15 per attendee if the event organization is a member of EAA.	Due immediately after event. Note: Minimum payment is \$200