

# CEU Course and Presenter Application

Use this form to apply to have your continuing education course covered by Life Renewal for CEU credits

\* Required

1. First Name \*

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2. Last Name \*

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3. Office Mailing Address \*

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4. Office Physical Address (if different than mailing)

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## 5. State of Licensure \*

*Mark only one oval.*

AL

AK

AZ

AR

CA

CO

CT

DE

FL

GA

HI

ID

IL

IN

IA

KS

KY

LA

ME

MD

MA

MI

MN

MS

MO

MT

NE

NV

NH

NJ

- NM
- NY
- NC
- ND
- OH
- OK
- OR
- PA
- RI
- SC
- SD
- TN
- TX
- UT
- VT
- VA
- WA
- WV
- WI
- WY

6. License # (Primary one if you have multiple) \*

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7. Type of Clinical License \*

Mark only one oval.

- LMSW
- LCSW or (LISCW)
- LMHC
- LPC
- LMFT
- Licensed Psychologist

8. Presenter Bio (Max 150 words) \*

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Course Information

Please tell us about your course.

Each course should have 3-5 learning objectives.

Learning Objective Format:

After completing this course, participants will be able to: INSERT OBJECTIVE  
STARTING WITH A VERB

Example: After completing this course, participants will be able to DEMONSTRATE  
active listening  
skills.

Only completed courses will be considered for CEU credit

9. Course Title as it will appear on CEU Certificates \*

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10. Length of Course (in Minutes) \*

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11. Number of Anticipated Breaks during teaching (in Minutes) \*

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12. Course Summary (50-100 words) \*

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13. Course Learning Objective 1 (minimum 3/max 5) \*

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14. Course Learning Objective 2 (minimum 3/max 5) \*

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15. Course Learning Objective 3 (minimum 3/max 5) \*

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16. Course Learning Objective 4 (minimum 3/max 5)

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## 17. Course Learning Objective 5 (minimum 3/max 5) \*

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### Grievance Process

Should a trainee have a grievance with Life Renewal regarding provision of CEUs, Life Renewal Representative, Jennifer Street, will serve as the Continuing Education Coordinator and will attempt to arbitrate.

Should a trainee have a grievance with you directly as the provider of continuing education units, you will be required to serve as the Continuing Education Coordinator and will attempt to arbitrate.

No one other than yourself is permitted to teach this training course for CEU approval through Life Renewal. Any additional Trainees must go through a separate application process.

### Required Attachments

The following documents must be attached to this application for it to be considered complete:

- Signed Presenter Contract
- Presenter Resume and/or Curriculum Vitae
- Detailed Outline of Training Content and Schedule including all breaks
- Presenter Transcript from highest degree completion
- Copy of active Clinical Licenses (must remain updated annually)
- Copy of active Professional Liability coverage (must remain updated annually)
- Copy of active General Liability Insurance Coverage (must remain updated annually)
- Course powerpoint/slide deck (can be pdf or ppt)
- APA format reference list for course

## 18. Signed Presenter Contract \*

Files submitted:

## 19. Presenter Resume \*

Files submitted:

## 20. Presenter Curriculum Vitae (if available)

Files submitted:

## 21. Detailed Outline of Training Content and Schedule including all breaks \*

Files submitted:

## 22. Copy of active Clinical Licenses (must remain updated annually) \*

Files submitted:

## 23. Copy of active Professional Liability coverage (must remain updated annually) \*

Files submitted:

## 24. Course Powerpoint/Slide Deck \*

Files submitted:

## 25. APA Reference Form for Course \*

Files submitted:

Thank you for completing your CEU Course and Presenter Application.

Please allow 3-4 weeks for Application reviews and approvals. Approvals will be notified by email to the address provided in this form.

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