

Louisiana State Board of Social Work Examiners

Application for Continuing Education Approval Organization

Section A: Organizational Information

Name of Organization

Name of Director/President

Mailing Address City/State Zip

Physical Address (if different from above) City/State Zip

Telephone Fax

Email Address Website

Organization applying for *Continuing Education Approval Organization* status must have a significant and continual affiliation with the social work profession. Please indicate that which applies:

Professional Social Work Organization Social Work Service Provider
 CSWE Accredited School of Social Work

Organization applying for Continuing Education Approval Organization must have three (3) letters of references from any combination of the following:

Professional Social Work Organization Social Work Service Provider
 CSWE Accredited School of Social Work

Section B: Continuing Education Program

Review and approval of continuing education applications from continuing education providers must be completed by a credentialed social worker. Identify the social worker assigned to administer this process for the organization.

Name/Social Work Degree/Social Work Credential

Relationship to Organization

Mailing Address City/State Zip

Physical Address (if different from above) City/State Zip

Telephone Fax

Email Address

Section C: Approval Guidelines, Process and Agreement

Protocol for receiving request for approval from education presenters:

- Organization will provide LABSWE Continuing Education Approval Application to education presenters upon request.
- LABSWE Continuing Education Approval Application may be mailed, faxed, sent electronically and/or published on Organization website.
- Organization will accept only LABSWE Continuing Education Approval Applications, completed in its entirety and accompanied by required documentation.

Process by which Organization will study and assess the proposed education offering:

- Organization will review application and supporting documentation to determine that it meets all standards and guidelines established in “Criteria for Approving Continuing Education Offerings” and “Guide for Assessment of Continuing Education.”

As each organization is structured and staffed differently, organizations shall determine timeline for administering the continuing education program.

- Describe time limit set for making a decision on an educational offering’s suitability:

As each organization is structured and staffed differently, organizations shall determine their own fees, if any, charged for these services.

- Describe fees agency will charge to process Continuing Education Applications:

Section D: Authority

Submission of this signed application certifies that the Organization has studied the “Criteria for Approving Continuing Education Offerings” and “Guide for Assessment of Continuing Education,” and determined that the Organization is prepared to assess continuing education opportunities by these guidelines on a timely bases; and has ample storage to maintain all continuing education records for a minimum of three years, and in accordance with Louisiana law. Organization understands that if approved, the organization will be given authority to pre-approve social work continuing education for three (3) years. After three (3) years, the organization shall reapply to the Board if interested in maintaining designation as a pre-approving body. Organization agrees to comply with scheduled LABSWE Continuing Education audits and submit a list of all approved programs to the board office for current collection period by July 15 of each year. Organization agrees to notify LABSWE within thirty (30) days if any information submitted on this application changes. Organization understands that approval is granted at the discretion of the Board and may be revoked if Organization is found to be out of compliance with any aspect of established guidelines.

This designation also designates the organization as an approved provider of continuing education. This designation will be authorized for three (3) years from the date LABSWE approves the application.

Signature of Director/President

Date

Submit completed and signed application, along with three (3) reference letters, to:

Louisiana State Board of Social Work Examiners
18550 Highland Road, Suite B
Baton Rouge, Louisiana 70809

For LABSWE office use only:

Application Received _____ Application Reviewed _____ Application Approved/Denied _____

Approval Expires _____

Revised 5/16