



National Association of Social Workers—California Chapter

## Important Information

To provide CEUs through NASW-CA region, unit, or council events, this CE application must be submitted with all required materials within 10 days of the event.

This application and material are required to meet the BBS requirements for all CE Providers. Non-compliance can impact the chapter's Approved CE Provider standing with the licensing board, the BBS.

The chapter does not offer CEUs for any event that is not offered through the chapter, region, unit, or council. Non-NASW entities must apply with one of BBS recognized approval agencies. For list of recognized approval agencies go to [http://www.bbs.ca.gov/licensees/ce\\_provider.shtml](http://www.bbs.ca.gov/licensees/ce_provider.shtml).

For questions about completing this application, e-mail [naswleg@naswca.org](mailto:naswleg@naswca.org).

## Region/Unit/Council CE Event

### Application – Part A

### Contact Forms

Revised May 3, 2017



National Association of Social Workers  
California Chapter

## Region/Unit/Council CE Event Application

### **Required Application**

These application materials must be utilized when applying for continuing education units for an event offered through a region, unit, or council.

**Important:** Please note the instructor information must be provided by the instructor and not the contact person.

### **Application Includes**

Part A - Contact's Forms	Contact's Information	Page 3
	NASW & BBS Guidelines	Page 4
	Contact's Checklist	Page 5
Part B - Participant Forms	Participant Sign-In Sheets	Page 7-9
	Participant Evaluation Form	Page 10
	Certificate of Completion	Page 11
Part C - Presenter Forms	Presenter Information	Page 13
	Course Information "Sample"	Page 14

### **Region/Unit/Council Contact**

Please make sure the most appropriate person in the Region/Unit/Council receives this application packet.

### **Meeting BBS Requirements**

Your assistance in maintaining the continuing education regulations set by the Board of Behavioral Sciences is very much appreciated.

### **Chapter Contact**

Please email [naswleg@naswca.org](mailto:naswleg@naswca.org)

## Region/Unit/Council Contact Form

The region/unit/council contact person is responsible for the following:

1. Ensuring that the instructor meets NASW-CA Instructor Criteria.
  2. Ensuring that the CE Course meets BBS CE Laws and Course Guidelines.
  3. Ensuring that all required forms and materials are completed properly and mailed to Sacramento Office a maximum of 10-days after the event.
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**Instructions:**                      **With a dark pen, print the required information.**

Region/Unit/Council: \_\_\_\_\_

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

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

Phone Number:                      (w) \_\_\_\_\_ (h) \_\_\_\_\_

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

Title of Event: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Location of Event: \_\_\_\_\_

Hours - Circle One                      1    1.5                      2    2.5                      3    4                      5                      6                      7

Cost to Participants (if any)    NASW-Member \$ \_\_\_\_\_    Non-Member \$ \_\_\_\_\_

Print name of co-sponsor:

Contact person's signature indicates the course and instructor meet NASW & BBS guidelines as delineated on the next page.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## NASW-CA and CA Board Continuing Education Requirements

### NASW-CA Instructor Criteria

1. Licensed: The presenter shall hold a current valid license and be free from any disciplinary action by the BBS or other jurisdiction; be knowledgeable, current, and skillful in the subject matter as evidenced through:
  - A master's degree and validated professional experience in content area
  - Teaching experience in content area within last two years
2. Non-Licensed: The presenter shall hold a current Masters Degree and be certified in content area, or show evidence of specialized training and/or professional experience, as well as having one year's experience in teaching content area within the last two years.
3. Teaching Experience: Knowledgeable & Skilled in Adult Education Theory and Methods.

### BBS Regulations – LCSW Continuing Education Law

States: Training, education, and coursework must incorporate one or more of the following:

1. Aspects of the social work discipline that are functional to the understanding, or the practice of social work.
2. Aspects of the social work discipline in which significant recent developments have occurred.
3. Aspects of other related disciplines that enhance the understanding, or the practice of social work.
4. A system of continuing education for social workers will include courses directly related to the diagnosis, assessment, and treatment of client populations being served.

### BBS Regulations (Section 1887.4) – Course Content

The content of the course shall be relevant to the practice of marriage, family and child counseling or clinical social work and meet the requirements set forth sections 4980 and 4996.

- (a) The content will be related to direct or indirect patient and client care.
  - Direct patient or client care courses will cover specialty areas of therapy (e.g., theoretical frameworks for clinical practice, intervention techniques with individuals, couples, or groups).
  - Indirect patient or client care courses cover pragmatic aspects of clinical practice (e.g., legal or ethical issues, consultation, record keeping, office management, insurance risks and benefits, managed care issues, research obligations, supervision training).
- (b) A course must have specific and measurable learning objectives. Upon completion of the course, there must be an evaluation method utilized.

### Marketing and Course Advertisement Requirements

Advertisements need to be accurate and include:

1. the provider's name: **NASW-CA Chapter**
2. the statement: **"Course meets the qualifications for \_\_\_\_\_ hours of continuing credit for LCSWs, LMFTs, LPCCs, or LEPs as required by the California Board of Behavioral Sciences.**
3. the provider's policy on refunds in cases of non-attendance; and
4. a clear, concise description of the course content and objectives.

## Region/Unit/Council Contact Checklist

### **Instructions:**

Please use this checklist to organize and ensure that all required forms and materials are mailed no later than 10-days after the event. Put a check mark by each item before mailing all of the materials at one time.

### **Part A – Contact Forms**

Region/Unit/Council Contact Form	Page 3-4	_____
Contact's Checklist	Page 5	_____
A copy of the marketing brochure, flyer, etc.	Add	_____

### **Part B - Participant Forms**

Completed Sign-in Sheet(s)	Pages 7-9	_____
Completed Participant Evaluation	Page 10	_____
One copy of a Certificate of Completion	Page 11	_____

### **Part C – Instructor Forms**

Instructor Resume and Copy of Professional License	Add	_____
Presenter Forms and Materials	Pages 13-14	_____
Instructor created "Course Information"		_____
A 75-word course description		_____
A participant agenda		_____
Three measurable learning objectives		_____
If two hours or more, a copy of instructional materials or handouts		_____
If two hours or more, a copy of bibliography or resource list		_____
If two hours or more, a 50-word diversity statement		_____

### **Mail Forms and Materials**

Please email all forms and materials to [naswleg@naswca.org](mailto:naswleg@naswca.org) or mail in one envelope to the following address:

NASW-CA CE Program  
1016 23<sup>rd</sup> Street  
Sacramento, CA 95816

# **Region/Unit/Council CE Event**

## **Application – Part B**

### **Participant Forms**

## NASW-CA Regional/Unit/Council CE Event Sign-In Sheet

Title of Event: \_\_\_\_\_

Day & Date: \_\_\_\_\_

Instructor Name: \_\_\_\_\_

**IMPORTANT: The BBS requires license numbers (ASW, LCSW, LMFT...)**

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❖ Print Name \_\_\_\_\_

Print Address \_\_\_\_\_

\_\_\_\_\_

Work Telephone # \_\_\_\_\_ License # \_\_\_\_\_

Sign-in \_\_\_\_\_ Sign-out \_\_\_\_\_

❖ Print Name \_\_\_\_\_

Print Address \_\_\_\_\_

\_\_\_\_\_

Work Telephone # \_\_\_\_\_ License # \_\_\_\_\_

Sign-in \_\_\_\_\_ Sign-out \_\_\_\_\_

❖ **Print Name** \_\_\_\_\_

Print Address \_\_\_\_\_

\_\_\_\_\_

Work Telephone # \_\_\_\_\_ License # \_\_\_\_\_

Sign-in \_\_\_\_\_ Sign-out \_\_\_\_\_

## NASW-CA Regional/Unit/Council CE Event Sign-In Sheet

Title of Event: \_\_\_\_\_

Day & Date: \_\_\_\_\_

Instructor Name: \_\_\_\_\_

**IMPORTANT: The BBS requires license numbers (ASW, LCSW, LMFT...)**

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❖ **Print Name** \_\_\_\_\_

Print Address \_\_\_\_\_

\_\_\_\_\_

Work Telephone # \_\_\_\_\_ License # \_\_\_\_\_

Sign-in \_\_\_\_\_ Sign-out \_\_\_\_\_

❖ **Print Name** \_\_\_\_\_

Print Address \_\_\_\_\_

\_\_\_\_\_

Work Telephone # \_\_\_\_\_ License # \_\_\_\_\_

Sign-in \_\_\_\_\_ Sign-out \_\_\_\_\_

❖ **Print Name** \_\_\_\_\_

Print Address \_\_\_\_\_

\_\_\_\_\_

Work Telephone # \_\_\_\_\_ License # \_\_\_\_\_

Sign-in \_\_\_\_\_ Sign-out \_\_\_\_\_



## NASW-CA Regional/Unit/Council CE Event Sign-In Sheet

Title of Event: \_\_\_\_\_

Day & Date: \_\_\_\_\_

Instructor Name: \_\_\_\_\_

**IMPORTANT:** The BBS requires license numbers (ASW, LCSW, LMFT...)

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❖ **Print Name** \_\_\_\_\_

Print Address \_\_\_\_\_

Work Telephone # \_\_\_\_\_ License # \_\_\_\_\_

Sign-in \_\_\_\_\_ Sign-out \_\_\_\_\_

❖ **Print Name** \_\_\_\_\_

Print Address \_\_\_\_\_

Work Telephone # \_\_\_\_\_ License # \_\_\_\_\_

Sign-in \_\_\_\_\_ Sign-out \_\_\_\_\_

❖ **Print Name** \_\_\_\_\_

Print Address \_\_\_\_\_

Work Telephone # \_\_\_\_\_ License # \_\_\_\_\_

Sign-in \_\_\_\_\_ Sign-out \_\_\_\_\_

## Region/Unit/Council CE Event Evaluation

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

Date: \_\_\_\_\_

**Instructions:** Please complete this evaluation form. Your comments assist NASW and the instructor in ensuring quality presentations.

### Rating System

5 = Significantly Above Average

4 = Above Average

3 = Average

2 = Below Average

1 = Significantly Below Average

### Please Rate Course Content

Was the course material effectively organized? \_\_\_\_\_

Did the course accomplish the stated objective? \_\_\_\_\_

Did the content include major issues, themes, and up to-date research? \_\_\_\_\_

Was the content timely and applicable to daily practice? \_\_\_\_\_

Did the content meet your personal expectations? \_\_\_\_\_

### Please Rate Instructor

Were the learning objectives clearly stated and met? \_\_\_\_\_

Were various teaching methods e.g., visual aids, and vignettes utilized? \_\_\_\_\_

Did the instructor offer a favorable climate for learning e.g., encouraged questions? \_\_\_\_\_

Was the presentation interesting and lively? \_\_\_\_\_

Did the instructor demonstrate expertise in this content? \_\_\_\_\_

Would you recommend this course to a friend or colleague? Yes\_\_\_ No\_\_\_

➤ Please describe one thing you most liked about this course.

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➤ Please describe one recommendation for improving this course.

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National Association of Social Workers  
California Chapter

Region/Unit/Council CE Event

## Certificate of Completion

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Participant's Full Name License (ASW, LCSW, IMF, or LMFT) Number

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Course Title Hours/ CEUS Completed Course Date

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Region/Unit/Council Region/Unit/Council Contact Person Name (Print)

This course meets the qualifications for Continuing Education for LCSWs, LMFTs, LPCCs, and LEPs as required by the CA State Board of Behavioral Sciences.

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Region/Unit/Council Contact Person Signature

NASW-CA Chapter  
1016 23<sup>rd</sup> Street  
Sacramento, CA 95816  
[www.naswca.org](http://www.naswca.org)

# **Region/Unit/Council CE Event**

## **Application – Part C**

### **Presenter Forms**

## Region/Unit/Council Presenter Information

Instructions Using a dark pen **print** the required information.

Full Name \_\_\_\_\_

Home Address \_\_\_\_\_

**Primary Telephone** \_\_\_\_\_

Professional Title \_\_\_\_\_

Employer \_\_\_\_\_

Work Telephone \_\_\_\_\_

NASW Member Yes \_\_\_\_\_ No \_\_\_\_\_

License State and Number \_\_\_\_\_

Have you taught this course previously? Yes \_\_\_\_\_ No \_\_\_\_\_

Where and When? \_\_\_\_\_

Are you a BBS Continuing Education Approved Provider? Yes \_\_\_\_\_ No \_\_\_\_\_

### Attach:

#### Presenter Information:

1. Current resume
2. Copy of professional license if applicable

#### Course Information:

1. A 75-word course description
2. A course outline and agenda
3. Two or three measurable learning objectives
4. If two or more hours, a copy of instructional materials/handouts
5. If two or more hours, a copy of bibliography or resource list
6. If two or more hours, a 50-word statement diversity is incorporated

#### NASW-CA Diversity Statement

All NASW-CA affiliated presentations must include the significance of diversity factors in relation to appropriate and effective diagnosis, intervention, and treatment (including but not limited to): race, ethnicity, culture, gender, and age.

## Presentation Information Sample

Title & Hours:	Can I do social work and have a life?	Three Hour Course
Description:	Working in social services or mental health can be challenging and interesting. It can also mean losing perspective on “real” life. If you sometimes find it difficult to balance your work with an equally challenging and interesting life, come to this highly interactive course ready to learn specific techniques to encourage and support an important balance.	
Outline:	<p>A. Where Are You Now?</p> <ol style="list-style-type: none"><li>1. Describe attitude towards life and work</li><li>2. What is the first priority for change?</li><li>3. What have you done to make change?</li><li>4. What got in your way?</li></ol> <p>B. Elements of Stress Management</p> <ol style="list-style-type: none"><li>1. Attitudes</li><li>2. Time Management</li><li>3. Setting Boundaries, Limits, and Priorities</li><li>4. Enlisting Support</li></ol> <p>C. Creating a Picture of “Balance”</p> <ol style="list-style-type: none"><li>1. What the does the “right” brain tell you? The left?</li><li>2. What would balance look like for you?</li><li>3. How will you enlist support?</li><li>4. Setting time lines for change</li></ol> <p>D. Pulling It All Together</p> <ol style="list-style-type: none"><li>1. Setting dates for evaluation</li><li>2. Where to find professional support</li><li>3. Don’t get mad, get funny</li></ol>	

### Participant Course Agenda

8:30am	Welcome and Introductions
8:45am	Learning Objectives
9:00am	Major Elements of Stress Management
10:15am	15-minute break
10:30am	An Action Plan: How to Pull It All Together
11:15am	Review Resource List and Address Questions
11:30am	Class ends

### Learning Objectives

1. Participants will develop a clear understanding of what is happening in their lives and will determine what is creating the most stress.
2. Through a series of activities, participants will create a clear verbal and written picture describing what “balancing work and life” would look like for themselves over the next three months.
3. Utilizing a variety of creative techniques, participants will develop an action plan detailing their goals, strategies, and support systems for the next three months.