DISTANCE LEARNING/INDEPENDENT STUDY/WEBINAR NOTICE FORM

Approved Providers must submit notification of all distance learning/independent study/webinar programs and obtain approval from the TCBAP Standards Committee. This form must be submitted to TCBAP. No other notification will be accepted. The TCBAP Standards Committee will respond in writing within ninety (90) days with course approval, a request for more information, or course denial and explanation.

PROVIDER INFORMATION

Provider Name (as it appears on provider certificate) ___________________________ Provider Number ___________________________

PROGRAM INFORMATION

Program Title ___________________________

Program Format (e.g. internet course, video and text, etc.) ___________________________

Program Instructor(s) ___________________________

Program Date ___________________________ Program Time ___________________________ Duration ___________________________

PLEASE ATTACH THE FOLLOWING ITEMS TO THIS NOTICE:

(1) Course outline and objectives
(2) List of course references
(3) Detailed description of how course functions, including a description of how students will have access to the instructor

Will this program be advertised? YES NO

Will this program be open to all professionals? YES NO

PLEASE CATEGORIZE HOURS AS FOLLOWS:

General Education Credit Hours
Ethics Credit Hours
Clinical Supervision Credit Hours
Cultural Awareness Credit Hours
Dual Diagnosis Credit Hours
Prevention Credit Hours
Criminal Justice Hours
HIV/STD Hours

TOTAL CREDIT HOURS OFFERED FOR THIS COURSE ___________________________

MAIL/FAX/EMAIL THIS FORM TO: TCBAP, 401 Ranch Road 620 South, Ste. 310, Austin, TX 78734
FAX: (888) 506-8123 * EMAIL: admin@tcbap.org

FOR OFFICE USE ONLY

Date received: ___________________________ Reviewed by: ___________________________ Approval Date: ___________________________

Notes: ___________________________