

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 TCB Standards Committee. This form must be submitted to TCB. No other notification will be accepted. The TCB 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:

TCB, 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: _____