

Cosponsorship Application for ACEPs Partnering With Another ACEP

This application allows NBCC Approved Continuing Education Providers (ACEPs) to partner on a program, using both organizations' ACEP numbers to offer NBCC credit.

First ACEP Information:				
ACEP Name:	ACEP Number:			
ACEP Administrator Name:				
ACEP Administrator Email:				
Second ACEP Information:				
ACEP Name:				
ACEP Administrator Name:				
ACEP Administrator Email:				
Incomplete applications will not be accepted. Submission of a con Application fees are nonrefundable as				
Program Information:				
Program Title:				
Scheduled or planned date(s) for the live program:				
The following approval statement is required on all promotional materials, program websites, and the certificate of completion:				
[FIRST ACEP NAME], ACEP No, and [SECOND ACEP NAME], ACEP No, are cosponsors of this program. This cosponsorship has been approved by NBCC. Both ACEPs are responsible for this program, including the awarding of NBCC credit.				
 □ Attach the completed Cosponsor Relationship Form outlining the roles and responsibilities of each ACEP and the identities of the individuals and organizations involved in developing, planning, and implementing the program. □ Attach a sample of the certificate of completion to be distributed to program participants. 				
Cosponsorship Fees				
Gosponsorship 1				
For cosponsorship between ACEPs, the ap	oplication fee is waived.			
Rush Fee: Applications submitted less than 90 days before the event date are subject to a "rush" fee. (Applications must be received at least 30 days prior to the event.)	\$100 Rush Fee			
Applications are reviewed in the order Send application, requ	ired materials, and payment form (if applicable) to:			

received. Applications received less than 30 days before the event will not be reviewed.

NBCC CE Department 3 Terrace Way Greensboro, NC 27403-3660.

You may also fax to 336-547-0017 (Attention: CE Department).



Task

Cosponsor Relationship Form

First ACFP Second ACFP

Indicate the parties responsible for the roles and tasks of the ACEP and the cosponsoring organization, including the identities of the individuals involved in developing, planning, and implementing the specific program described in this Cosponsorship Application. All proposed cosponsorship relationships must be reviewed and approved by NBCC prior to the presentation of a qualifying cosponsored program for NBCC credit.

Name of Person Responsible for Task

1401		000011011011	
Program design and development			
Review of program content and learning objectives			
Review of presenter qualifications relative to the program content			
Presenter contract(s) and/or hiring of presenter(s) (if applicable)			
Development of promotional materials			
Location selection			
Certificate of completion development			
Final selection of program			
Distribution of promotional materials			
Registration management			
Attendance verification			
Authorized representative who will sign certificate of completion			
Distribution of certificates of completion			
Compilation of participant evaluation summary			
Maintenance of attendance roster and evaluations for five years			
Maintenance of brochures and program agendas for five years			
Adherence to all policies not otherwise specified above			
that the information provided in this policy compliance and resolution of i	application ssues that m	and the attach ay arise releva	e NBCC Continuing Education Provider Policy and ments is complete. Both ACEPs are responsible for nt to the program.
Name of Second ACEP Administrator:			
Signature:			Date:

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ACEP / ACEP Cosponsorship Application Payment Authorization

Name of First ACEP:	ACEP#:			
Name of Second ACEP:	ACEP#:			
If you wish to submit this application via email, DO NOT complete the credit card information on this page. Check this box and email your application to continuinged@nbcc.org. We will reach out to you via email with instructions for submitting payment.				
The ACEP must submit a separate application for each distinct program pertaining to this cosponsor relationship. Only submit this page if a rush fee applies.				
Cosponsorship Fees				
For cosponsorship between ACEPs, the application fee is waived.				
Rush Fee : Applications submitted more than 30 days but les 90 days before the event date will be subject to a "rush" fee.	NIUU Kiich Hee			
☐ Enclosed is a check or money order payable to NBCC. (V numbers on the memo line.)	Vrite "Cosponsorship Application" and include both ACEP			
☐ I authorize NBCC to charge the credit card below in the amo	ount of \$			
Card Type: ☐ VISA ☐ MasterCard ☐ American Expre	ess			
Name on Card:				
Card Number: Verification Code Numbers (from back of card): Expiration Date: Verification Code Numbers (from back of card):				
Cardholder Signature: Date:				
Daytime Telephone:	Evening Telephone :			
Note: Paying the wrong fee or sending payment separately will significantly delay the processing of your application. Email continuinged@nbcc.org with questions. Application fees are nonrefundable and nontransferable.	Send application, required materials, and payment form to: NBCC CE Department 3 Terrace Way Greensboro, NC 27403-3660. You may also fax to 336-547-0017 (Attention: CE Department).			

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