

STATE OF NEVADA
BOARD OF EXAMINERS FOR LONG-TERM CARE ADMINISTRATORS
3157 North Rainbow Blvd., #313
Las Vegas, NV 89108
(702) 486-5445
FAX: (702) 486-5439
E-mail: beltca@beltca.nv.gov

**Application for Accreditation of Continuing Education Units
By Sponsoring Organization**

Program Title: _____

Date: _____ Time: _____

Location: _____

Number of Contact Hours Requested: _____

Please Check Intended Audience Below:

Nursing Home Administrator: _____

Residential Care Administrator: _____

Both: _____

Name of Person Submitting Application: _____

Agency Affiliation: _____

Address: _____

_____ Phone: _____

City	State	Zip
------	-------	-----

E-mail Address: _____

CE Committee Use Only

Program Number: _____ Reviewer: _____ Date: _____

Approved: _____ No. of Hours: _____ Expiration Date: _____

Pending: _____ Required Items: _____

Denied: _____ Reason: _____



The following are requirements for approval:

- Program must be provided by a competent instructor as demonstrated by documentation of his/her educational, professional and teaching experience
- Program must contain current educational material relevant for nursing home and/or residential care facility administrators
- Program must be of professional quality

The following Must Accompany All Applications:

- Instructor's/Speaker's resume
- Detailed time schedule
- Statement of the educational objectives of the program
- Copy of Certificate of completion

Note: Applications for continuing education accreditation will not be reviewed for accreditation until all of the items listed above are received. Please see "CEU APPROVAL PROCEDURE" for required fees.

Within 20 days after the presentation of the program, a list of licensed nursing home and/or residential care facility administrators who attended must be provided to the Board office.

Records must be maintained for one (1) years after the completion of the course or program.