

**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:

Ethics

Regulations _

Registration Fee:

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:

Reviewers:

Date:

Approved:

Contact Hours:

Expiration Date:

Pending:

Required Items:

Denied:

Reason:



1. Must be provided by a competent instructor as demonstrated by documentation of his/her educational, professional and teaching experience:
2. Must contain current educational material relevant for nursing home and/or residential care facility administrators:
3. Must be of professional quality:
4. Must be appropriately designed for instructional purposes.

The following MUST accompany all applications:

Event flyer or Registration Form

Instructor's/speaker's resume

Detailed time schedule

Statement of the educational objectives of the program

Certificate of completion

Note: Applications for continuing education accreditation will not be reviewed for accreditation until all of the items listed above are received.

Within 30 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 three (3) years after the completion of the course or program.