

## Continuing Education Credits Application AHRMM Affiliated Chapters

AHRMM offers Continuing Education Credit (CEC) hours for educational programs that meet the requirements below. CEC credits are used by professionals to earn or renew certain professional designations, such as the Certified Materials & Resource Professional Certification (CMRP). Please read the instructions and complete the application to be considered for CEC credit hours for an upcoming educational program.

- **APPLICATION DEADLINE** – Complete applications and required documentation must be received at least 60 days prior to the event date. Applications received after this date will incur a late fee in addition to the application fees as outlined below:
 

| <b>Date Received</b>                                  | <b>Late Fee</b> |
|---|-----------------|
| ○ Applications received 30-60 days in advance:        | \$150           |
| ○ Applications received less than 30 days in advance: | \$300           |
- **REQUIREMENTS** – The CEC Application, *Multi-Session Description form*, and timed agenda should be emailed to [ahrmm@aha.org](mailto:ahrmm@aha.org). AHRMM may request additional information and, if approved, will send a confirmation email and invoice. Upon receipt of payment AHRMM will email the CEC certificate(s). Processing may take two weeks; additional time may be required.
- **CONTENT AND PRESENTERS** – Program organizers and presenters must agree to the *AHRMM Speaker's Agreement* as indicated on the application. Education sessions must be educational and deliver best practices, case studies, resources, and/or solutions relating to the Certified Materials & Resource Professional Certification (CMRP) designation as outlined in the [CMRP Examination Outline](#). Presentations that are commercial in nature and/or attempt to sell specific vendor products and/or services will not be accepted. Company or organizational logos, product photos or any type of sales information may not be used in presentations or handouts.
- **CEC APPROVAL** – *Education programs must be held in 30 or 60 minute increments*. 30 minutes = .5 CEC hour; 60 minutes = 1 CEC hour. Includes only the education portion(s) of the program and *does not include* time spent on general announcements, breaks, exhibits, associated meetings or the like.
- **AWARDING CECs** – Retention of attendee records and distribution of attendee certificates is the *responsibility of the program sponsor(s)/organizer(s)*. Program organizers must make every reasonable effort to verify that attendees complete the education for which CEC hours are awarded. Neither AHA nor AHRMM will track CEC credit for participants and they cannot verify an individual's participation in an educational activity.
- **FEES** – The certificate fee for affiliated chapters is \$80/hour for Standard chapters, \$65/hour for Bronze chapters, \$50/hour for Silver chapters, and \$40/hour for Gold and Diamond chapters per 1-hour live or virtual session, including overlapping sessions. The certificate fee for non-affiliated chapters is \$160/hour. The fee for repeated sessions or those offered in an online library or learning management system is \$100/week per 1-hour session with a maximum of 4 weeks. Certificate fees are non-refundable and must be received before the certificate will be awarded. In the event of an event's cancellation, the certificate fee may be applied to a future event.

Email application and documentation to [ahrmm@aha.org](mailto:ahrmm@aha.org)  
Questions: (312) 422-3840 or [ahrmm@aha.org](mailto:ahrmm@aha.org)

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- Submit** 1) program outline and timed agenda (marketing pamphlet/brochure, etc.);  
2) completed application;  
3) Session description form (pages 2-4 attached if requesting 1-3 individual sessions); **OR**  
Excel multi-session description form (if requesting more than 3 individual sessions)

**Main Program Title** (as it is to appear on the certificate)

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**Organization Sponsor Name** (as it is to appear on the certificate)

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**Type of Program** (check as appropriate)

☐ In-person education – indicate Location (city, state) \_\_\_\_\_  
☐ Virtual education  
☐ Expected number of attendees \_\_\_\_\_

**Program Date(s)**

- One-Time Presentation Date(s) \_\_\_\_\_
  - Multiple Presentation/Virtual on-demand Dates (i.e. April 5th-30th) \_\_\_\_\_ (4 weeks max)
- 

**Session Information**

☐ Total number of individual sessions within program  
☐ Total number of CEC credits

**Contact Information**

**Contact Name** \_\_\_\_\_  
**Title** \_\_\_\_\_  
**Phone** \_\_\_\_\_  
**Email** \_\_\_\_\_

**Speaker Agreement:** AHRMM approved education must be noncommercial. The direct promotion of products and services is prohibited.

By signing this form and the multi-session description form, the representative and presenter(s) agree that the oral, electronic and paper presentation and accompanying session resources are for educational purposes only and will not promote any one commercial entity's product or service type directly or indirectly. If discussed, presenters should use general and generic terms and give a balanced view of each without bias towards any specific one. **Company or organizational logos, product/service photos or any sales information may not be used in presentations or session resources.**

**Organization Representative:** \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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 Questions: (312) 422-3840 or [ahrmm@aha.org](mailto:ahrmm@aha.org)

## CEC Session Description Form

Use the *Excel Multi-Session Description form* (obtain from [ahrmm@aha.org](mailto:ahrmm@aha.org)) if you are requesting CECs for more than three sessions. Use pgs. 3-4 below if you are requesting CECs for 3 sessions or less.

Submit the application and either the *Excel Multi-Session Description form* or this *CEC Session Description Form* below to [ahrmm@aha.org](mailto:ahrmm@aha.org).

### **Program Information**

|                   |                 |
|-------------------|-----------------|
| PROGRAM TITLE     | PROGRAM DATE(S) |
| ORGANIZATION NAME |                 |

### **Session Information**

|   |            |          |  |
|---|------------|----------|--|
| SESSION TITLE   |            |          | SESSION ____ OF ____   |
| SESSION DATE<br>MM/DD/YY  | START TIME | END TIME | SESSION LENGTH (# of minutes)<br>Please subtract any breaks included within the session. |
| Number of CEC contact hours requesting: _____<br>30 minutes= .5 CEC hour; 60 minutes= 1 CEC hour. AHRMM will evaluate the application and award CEC according to on education provided. |            |          |  |
| SHORT DESCRIPTION OF PROGRAM (100 character minimum)  |            |          |  |
| LEARNING OBJECTIVES (at least 3) Please use specific action verbs (ex: "Review," "Discuss," "Describe", etc.  |            |          |  |
| TARGET AUDIENCE   |            |          |  |

## CEC Session Description Form (page 2)

### Presenter Information

|                                |        |
|--------------------------------|--------|
| 1 <sup>st</sup> PRESENTER NAME |        |
| TITLE                          |        |
| ORGANIZATION                   |        |
| EMAIL:                         | PHONE: |
| ONE-PARAGRAPH BIO              |        |

|                                |        |
|--------------------------------|--------|
| 2 <sup>ND</sup> PRESENTER NAME |        |
| TITLE                          |        |
| ORGANIZATION                   |        |
| EMAIL:                         | PHONE: |
| ONE-PARAGRAPH BIO              |        |

If a session has more than two presenters, please duplicate this page.

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Authorized Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Representative: \_\_\_\_\_

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| ONE-PARAGRAPH BIO              |        |

|                                |        |
|--------------------------------|--------|
| 2 <sup>ND</sup> PRESENTER NAME |        |
| TITLE                          |        |
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