

State Board of Orthotics, Prosthetics, and Pedorthics

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CONTINUING EDUCATION COURSE PROVIDER'S APPLICATION

A signed, completed copy of this application and all attachments should be submitted to the Board at least 90 days before the event for which OPPCE units are requested in order to assure sufficient time for administrative process, review and approval and/or request for additional information/documentation.

(Please print or type)

Name of sponsoring organization _____

Sponsor's address _____

Contact Person _____ Phone _____

Email Address _____

Program Title _____

Date(s) Presented _____ Start Time _____ End Time _____

Course Location _____

Instructor(s) _____

OPPCE Credit Requested in: Orthotics Prosthetics Pedorthics

OPPCE Credits Requested: _____

Attach the following:

1. A program or agenda specifying subjects, instructors, and break or meal times;
2. A description of the course content, including expected benefits to attendees; and
3. A copy of the written materials to be provided to attendees (if written materials are not yet available, describe the expected materials).

Has this program been approved for continuing education credits by any credentialing board or state licensing board? No Yes Board & CE No.: _____

Ohio Revised Code section 4779.23 states that to be eligible for OPPCE credits, a continuing education course must satisfy **all** of the following requirements:

- (1) Include significant intellectual or practical content and be designed to improve the professional competence of participants;
- (2) Deal with matters directly related to the practice of orthotics, prosthetics, or pedorthics, including professional responsibility, ethical obligations, or similar subjects that the board considers necessary to maintain and improve the quality of orthotic and prosthetic services in this state;
- (3) Involve in-person instruction, except that a course may use self-study materials if the materials are prepared and presented by a group with appropriate practical experience;
- (4) Be presented in a setting that is physically suited to the course; and
- (5) Include thorough, high-quality written material.

I, _____ (print name), certify that the continuing education course for which I am requesting OPPCE units fulfills the above-listed ORC requirements and that I have personal knowledge of the course content, structure, and presentation details.

Signature: _____

Title: _____

Phone number: _____

<p>BOARD USE ONLY</p> <p>Total Hours approved: _____</p> <p>OPPCE Number: _____</p>
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