

# Louisiana State Board of Examiners of Psychologists

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## SPONSOR APPLICATION FOR APPROVAL OF CONTINUING PROFESSIONAL DEVELOPMENT

This application form is for utilization by a Sponsor, or any other individual who is responsible for the development and delivery of a Continuing Professional Development (“CPD”) offering or activity, and which Sponsor or individual, is seeking approval by the Louisiana State Board of Examiners of Psychologists (“Board”) pursuant to the La. Administrative Code (LAC), Title 46:LXIII.806 to ensure the activity meets the CPD requirements for a Licensed Psychologists or a Licensed Specialist in School Psychology in the state of Louisiana.

Sponsors that are currently recognized as approved under LAC:46:LXIII.805.C **are not** required to seek preapproval of CPD offerings/activities. **However**, this application is required of any sponsor, individual, hospital or other entity (whether or not the sponsor is recognized under the LAC: 46:LXIII.805.C) if the offering/activity will be advertised as approved, preapproved, endorsed or otherwise acceptable by the Board. Approved offerings or activities will be listed on the website of the Board.

SPONSOR INFORMATION	
BUSINESS/INDIVIDUAL	PRIMARY CONTACT
FULL LEGAL NAME OF COMPANY OR INDIVIDUAL:	NAME:
ADDRESS:	TITLE/POSITION:
	DIRECT PHONE #:
BUSINESS PHONE #:	EMAIL ADDRESS

CONTINUING PROFESSIONAL DEVELOPMENT PROPOSED OFFERING OR ACTIVITY	
<b>OBJECTIVES AND CONTENT</b> Pursuant to R.S. 37:2357(B), each licensed psychologist is required to complete continuing education hours, also referred to as continuing professional development (CPD) within biennial reporting periods. A CPD activity that meets acceptable criteria of the Board: <ol style="list-style-type: none"><li>1. are relevant to psychological practice, education and science;</li><li>2. enable psychologists to keep pace with emerging issues and technologies; and</li><li>3. allow psychologists to maintain, develop, and increase competencies in order to improve services to the public and enhance contributions to the profession.</li></ol>	
<b>(CHECK ONE)</b> <input type="checkbox"/> This is the first application submitted for this activity/offering. <input type="checkbox"/> This is a renewal application for this activity/offering.	
TITLE:	
MODE OF DELIVERY: (e.g. in-person, online live, online recorded)	ACTIVITY TYPE: <input type="checkbox"/> ½ DAY WORKSHOP <input type="checkbox"/> FULL DAY WORKSHOP <input type="checkbox"/> MULTI-DAY WORKSHOP <input type="checkbox"/> CONFERENCE <input type="checkbox"/> OTHER: (specify if selected):

<b>NAME(S) AND CREDENTIALS OF PRESENTERS:</b>			
<b>DATE(S): (INCLUDE ALL DATES)</b>		<b>EVENT/TRAINING LOCATION:</b>	
<b>TARGETED AUDIENCE:</b>			
Describe Psychological Basis/Principles/Concepts:			
Specific Learning Objectives:			
How will learning objectives be assessed?			
How will attendance be confirmed?			
<b>CREDIT HOURS REQUESTED</b>			
Louisiana requires 40 hours of continuing professional development per biannual reporting period. Credit is granted on a 1Hour:1Credit ratio. Within the required 40 hours, a licensee is required to obtain 2 hours of ethics or law AND 2 hours of multiculturalism or diversity. To qualify for ethics, law, multiculturalism or diversity, the program must be exclusively designated or have specific time exclusively dedicated to these topics.			
<b>EVENT START TIME:</b>		<b>EVENT END TIME:</b>	<b>ACTUAL HOURS IN TRAINING:</b>
<b>CHECK ALL THAT APPLY INCLUDING PERCENT OF TIME DEDICATED TO EACH:</b>			
<b>TOPIC</b>	<b>Percent of time dedicated to training</b>	<b>TOPIC</b>	<b>Percent of time dedicated to training</b>
<input type="checkbox"/> ETHICS	%	<input type="checkbox"/> MULTICULTURALISM	%
<input type="checkbox"/> LAW	%	<input type="checkbox"/> DIVERSITY	%
<input type="checkbox"/> ETHICS/LAW (Forensics)	%	<input type="checkbox"/> PRACTICE SPECIFIC CONTENT	%

**DOCUMENTATION REQUIRED TO BE ATTACHED TO APPLICATION**

1. Advertisements including mailers/flyers/brochures
2. Registration form
3. Agenda/syllabus

**GENERAL RECITALS, AFFIRMATIONS AND AGREEMENTS**

- I understand that a payment of the required application fee that is collected pursuant to La. Revised Statutes 37:2354.F.(1) and Louisiana Administrative Code, Title 46:LXIII. Chapter 6. FEES for initial sponsor application (\$100) or sponsor renewal application of the same activity/offering (\$25) is not refundable and the decision of the LSBEP is final.
- I understand that the LSBEP may deny an application if it is not found to meet the requirements and objectives for an acceptable Continuing Professional Development activity.
- I understand that an application submitted with missing information, including applications submitted without required data, illegible content, signatures or program brochures will be rejected and a new application and application fee will be required for subsequent review/consideration.
- I understand that this application does not grant the authority to the sponsor, its presenters or any other individual in association with the offering or activity that is the subject of this application to engage in the independent practice of psychology in Louisiana, defined in La.R.S. 37:2352.(7).

THE UNDERSIGNED APPLICANT, attests they are the person who is responsible for the development and/or delivery of the continuing professional development applied for in this form. FURTHER that the statements, oaths, recitals and affirmations contained herein are true and complete in every respect; FURTHER that they have not suppressed any information, omitted any information, misrepresented credentials for presenters/trainers, or otherwise provided misleading information that might affect the approval of this application; FURTHER that they have read and understands this affidavit.

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

APPLICANT TITLE: \_\_\_\_\_

**OPTIONS FOR PAYMENT/SUBMISSION OF APPLICATION**

1. Options for paying the required \$100 application fee:
  - a. Domestic Personal Check (no foreign checks), Cashiers Check or Money Order - Attach payment to your application. Checks should be made payable to "LSBEP" or "Louisiana State Board of Examiners of Psychologists". If sending a Cashiers Check or Money Order please properly complete the item before mailing.
  - b. Online Payment - There is an additional processing fee of \$3.20 for online payment of the Application Fee. Print a copy of your receipt and attach it to this application as proof of payment.

[PAYMENT LINK](#)

2. Mail your completed application with attached payment (or proof of payment if you paid online) to: LSBEP 4334 S. SHERWOOD FOREST BLVD. SUITE C-150 BATON ROUGE, LA 70817