

GEORGIA ASSOCIATION FOR MARRIAGE AND FAMILY THERAPY

GUIDELINES FOR CONTINUING EDUCATION APPROVAL

JANUARY 1, 2015 – DECEMBER 31, 2015

1. The Georgia Composite Board of Professional Counselors, Social Workers and Marriage and Family Therapists recognizes GAMFT as an appropriate organization to approve continuing education programs for licensed marriage and family therapists. Consequently, GAMFT has developed a procedure to approve programs for MFT continuing education credit. Such approval will be helpful in attracting marriage and family therapists desiring state licensing renewal to your continuing education program.
2. GAMFT will approve programs for MFT "core" or "ethics" credit that offer continuing education relevant to practice, theory or research in the field of couple and/or family therapy and are taught by qualified professionals.
3. GAMFT does not approve "related" hours. Submit only those applications seeking "core" or "ethics" hours.
4. Multiple offerings of the same workshop may be submitted on one application if all the offerings are within one year of the application date and if the dates are included in the application. Similarly, workshops that are part of a series may be submitted on one application if all the offerings are within one year of the application date and if each workshop in the series is fully described in the application.
5. Applications should be submitted at least six (6) weeks prior to the continuing education program in order to allow for processing. A late fee will be required for processing of applications submitted less than six (6) weeks prior to the date of the offering. Applications submitted less than two (2) weeks prior to the presentation will not be processed.
6. Retroactive approval is not granted.
7. **The following non-refundable processing fees must be submitted with each application:**
 - a. **\$100.00 per offering if a fee is charged for attending the workshop/conference.**
 - b. **\$50.00 per offering if no fee is charged for attending the workshop/conference.**
 - c. **Add \$25.00 for each additional presentation (up to \$100.00) for multiple offerings of the same workshop or for a series of workshops within one year of the application date.**
 - d. **Add a \$25.00 late fee for applications submitted less than six (6) weeks prior to the presentation.**
8. Applicants granted CE approval must create and keep on file for three (3) years a list of all MFT attendees. GAMFT does not maintain files of workshop participants.

9. To obtain GAMFT approval, the association, agency, organization or individual must complete and return the Application for Continuing Education Approval, including:
 - a. **a vita or completed Presenter Profile for all presenters;**
 - b. **a copy or draft of the workshop/conference brochure;**
 - c. **the evaluation form to be used by attendees in assessing whether or not the educational objectives were met;**
 - d. **a check for the non-refundable processing fee, made payable to GAMFT; and**
 - e. **a self-addressed, stamped envelope.**
10. After the Continuing Education Committee reviews the application, a decision will be made about whether it meets the requirements for MFT "core" or "ethics" CE and for how many hours. The sponsoring organization will be notified by mail of this decision.
11. If the application is approved, the sponsoring organization must issue a CE certificate to each MFT participant who attends and completes the program. The CE certificate must include the name of the sponsoring organization, the title and date(s) of the program, the number of CE hours completed and a statement that the workshop/conference has been approved as core (or ethics) hours by the Georgia Association for Marriage and Family Therapy. CE certificates should be safeguarded to ensure that only those attending the full presentation receive a certificate, and any extra certificates should be destroyed.
12. **Approved programs will be listed, at no additional cost, in GAMFT's Continuing Education Calendar, which is distributed to members and subscribers bi-monthly in the *GAMFT Newsletter* and posted monthly on the GAMFT website.** In addition, 1/4, 1/2 and full page newsletter advertisements may be purchased for \$70.00, \$140.00 and \$280.00 respectively by contacting the GAMFT office at (404) 261-1185. GAMFT members receive a 20% discount on advertising rates.
13. Please restrict phone inquiries. All decisions regarding applications are made in committee meetings in response to written applications and correspondence.
14. Mail all applications to:

**Jeff Bickers, LMFT
GAMFT CE Chair
P.O. Box 3229
Valdosta, GA 31603-3229**

**jjebick@bellsouth.net
229-244-4200
229-244-4995 fax**

GEORGIA ASSOCIATION FOR MARRIAGE AND FAMILY THERAPY

APPLICATION FOR CONTINUING EDUCATION APPROVAL

JANUARY 1, 2015 – DECEMBER 31, 2015

1. Name of Sponsoring Organization:
2. Address:
3. Contact Person:
4. Phone:
5. Fax:
6. Type of Organization:
7. Name of Workshop/Conference:
8. Date(s) of Workshop/Conference:
9. Name and Location of Facility:
10. Is this workshop/conference intended to provide Ethics CE hours? Yes _____ No _____
11. Cost to Participants:
12. Amount of Enclosed Processing Fee: \$..... Check Number:

For GAMFT Continuing Education Committee Use Only

ID # CE Hours Per Offering: Core Hours Ethics Hours

Total CE Hours Approved
CE Committee Chair

13. Program Description. Include a description of topics to be presented, goals and objectives, and relevance to practice, theory or research in the field of marital and/or family therapy. Please note that a brochure does not substitute for completion of this section.

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14. Please complete the schedule below. List instructional hours only, omitting any break time.

<u>Date</u>	<u>Time of Each Session</u>	<u>Instructional Hours</u>
_____	Begins _____ Ends _____	_____
_____	Begins _____ Ends _____	_____
_____	Begins _____ Ends _____	_____
_____	Begins _____ Ends _____	_____
_____	Begins _____ Ends _____	_____
_____	Begins _____ Ends _____	_____
_____	Begins _____ Ends _____	_____
_____	Begins _____ Ends _____	_____
_____	Begins _____ Ends _____	_____
_____	Begins _____ Ends _____	_____

Total Instructional Hours: _____

15. List All Presenters. Include a vita or, for programs with multiple presenters, complete the enclosed Presenter Profile for each presenter.

16. Describe Target Audience:

17. Certification and Documentation (*please initial*):

_____ CE certificates will be presented to all MFTs who attend the program.

_____ CE certificates will be safeguarded to insure that only those attending the full presentation will receive a certificate and that any extra certificates will be destroyed.

_____ CE certificates are valid only for the dates given on the application.

_____ A list of those attending the program will be created and kept on record for a period of three (3) years.

_____ Evaluation forms will be made available to GAMFT upon request.

18. In addition to the above information, the **following must be included** in order for the application to be considered:

(a) A Vita or completed Presenter Profile for all presenters;

(b) A copy or draft of the workshop/conference brochure;

(c) The evaluation form to be used by attendees in assessing whether or not the educational objectives were met;

(d) A check for the non-refundable processing fee, made payable to GAMFT; and

(e) A self-addressed, stamped envelope.

19. _____
Signature of Person Submitting Application

Date Submitted

20. Mail all applications to:

**Jeff Bickers, LMFT
Continuing Education Chair
P.O Box 3229
Valdosta, GA 31603-3229**

**229-244-4200
229-244-4995 fax
jujebick@bellsouth.net**

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PRESENTER PROFILE

For workshops/conferences with multiple presenters, reproduce and complete this form for each presenter.

1. Name of Presenter:
2. Education/Degrees:
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3. Licenses:
4. Current Occupation/Positions Held:
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5. Topic of Presentation:
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6. Summary of Relevant Qualifications:
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