# Activity Approval Checklist

Applications must be submitted 6 weeks prior to scheduled activity. Review begins once [required forms](https://www.forensicnurses.org/page/CEApproverDetails#anchor_1502465581657) and payment are received.

Expedited review may be requested with an additional fee.

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|  | 1. All documents below submitted via website and payment of application fee\* |
|  | 1. Individual Educational Activity (IEA) Application Document\* |
|  | 1. Applicant Eligibility Verification Document\* |
|  | 1. Educational Planning Table (EPT) Document |
|  | 1. Agenda – as appropriate (must be included if applying for 3 contact hours) |
|  | 1. Relevant Financial Disclosure Documents and Professional Bios\* |
|  | 1. Participant List/Attendance Tracker\* (Include Sign in sheet or describe how you plan to track attendance) |
|  | 1. Participant Evaluation Template\* |
|  | 1. CE Certificate Sample (with ANCC Statement) \* |
|  | 1. Marketing Material with Statement\* |
|  | 1. Disclosure to participants\* |
|  | 1. Presentation Handout/Slide deck/PPT (if applicable) |
|  | 1. Commercial Support Agreement (if applicable) |
|  | 1. Commercial Interest Addendum (if applicable) |
|  | 1. Joint Provider Agreement (only if event is jointly provided, available upon request) |

\* Applications will be reviewed once all required documents and fees are received

Contact [CE@ForensicNurses.org](mailto:CE@ForensicNurses.org) for assistance or questions, if needed