

Name: \_\_\_\_\_  SLP  A  SLP/A License Renewal Period: \_\_\_\_\_ to \_\_\_\_\_  
 I certify that the information below is accurate (supporting documentation attached): \_\_\_\_\_ (signature required)

*Licensees can document completion of CE hours through a transcript from ASHA or AAA's continuing education registry.*

CE Activity	Measurement of CE Credits	Documentation	CE Hours Earned/Dates
Giving a <b>new</b> seminar or in-service or lecture or in-service workshop * <b>new</b> means new to the person presenting a seminar, lecture or in-service workshop which the licensee has never presented before in any setting	<b>1 hour per contact hour*</b> *contact hour = 1 hour of actual presence in or participation in a course of study ----- <b>Up to a maximum of 10 hours</b>	<b>All</b> of the following for each presentation: <input type="checkbox"/> copies of program <input type="checkbox"/> syllabus <input type="checkbox"/> course outline <input type="checkbox"/> course objectives <input type="checkbox"/> bibliography	<input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
Teaching a <b>new</b> graduate course * <b>new</b> means new to the person teaching it; a course in which the licensee has never taught before in any educational setting	<b>6 hours for each new course</b> ----- <b>Up to a maximum of 12 hours</b>	<b>All</b> of the following for each course: <input type="checkbox"/> syllabus <input type="checkbox"/> bibliography <input type="checkbox"/> course outline <input type="checkbox"/> verification by institution that course was not previously taught by licensee	<input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
Publication in a national journal of a copyrighted article in audiology or speech-language pathology	<b>3 hours per publication</b> ----- <b>Up to a maximum of 6 hours</b>	<input type="checkbox"/> copy of published article	<input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
Attendance at seminars, lectures or in-service workshops	<b>1 hour per contact hour*</b> *contact hour = 1 hour of actual presence or participation in course of study ----- <b>No limit on hours</b>	<input type="checkbox"/> certificate of attendance <b>OR</b> <input type="checkbox"/> statement of instructor of the offering <b>Must include the licensee name &amp; all of the following:</b> <input type="checkbox"/> name of sponsor <input type="checkbox"/> title <input type="checkbox"/> location <input type="checkbox"/> date of offering <input type="checkbox"/> signature of program official <input type="checkbox"/> number of CE hours	<input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
Self Assessment Home Study courses *accompanied by an examination *sponsored by a nationally-recognized organization in Audiology or Speech-Language Pathology	<b>Up to a maximum of 10 hours</b>	<input type="checkbox"/> must present a copy of the official transcript	<input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
Successful completion of graduate course work *courses taken beyond that required for professional license *course must be COMPLETED PRIOR TO October 31st of the renewal year	<b>15 hours per course credit</b> ----- <b>Up to a maximum of 15 hours</b>	<input type="checkbox"/> must present a copy of the official transcript	<input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
Reading journal articles from ASHA or AAA	<b>1 hour per article</b> ----- <b>Up to a maximum of 6 hours</b>	<input type="checkbox"/> must present a copy of the official certificate of completion from ASHA or AAA	<input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
Successful completion of on-line seminars recognized by ASHA or AAA	<b>1 hour for each hour of the seminar</b> ----- <b>Up to a maximum of 10 hours</b>	<input type="checkbox"/> must present a copy of the official certificate of completion from ASHA or AAA	<input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
<b>TOTAL CE HOURS:</b>			_____ <b>(20 CE's)</b>

Acceptable CE shall be related to the practice of audiology & speech-language pathology and must be accredited by the NJ Commission on Higher Education, or accredited or sponsored by a local, state or national audiology and speech-language pathology professional organization, local, state, or Federal education or health agency, or a local, state or national medical psychological, dental or similar professional organization. Courses accepted for credit by the National Registry on Continuing Education or by ASHA will be given credit by the Committee as set forth in N.J.A.C. 13:44C-6.2.