



**Appendix 23 – Course Developer CEC Course Evaluation Form**

\*\*\*PLEASE NOTE We require ALL requested information. If all information is NOT provided, we will be unable to assess the course. \*\*\*\* Please print all information clearly.

**Submitted By:**

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

**Course Information:**

Course Name: \_\_\_\_\_

Name of Course Developer: \_\_\_\_\_

Course Date(s): \_\_\_\_\_ Course Location(s): \_\_\_\_\_

Total Hours of Course: \_\_\_\_\_ \*\*\*including all theory & practical hours\*\*\*

Specification of Instructor to Student Ratio (for in-person or live-online instruction): \_\_\_\_\_

**Course Registration Information:**

Email Address: \_\_\_\_\_

Website Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

**Teaching Experience:** (please check ALL that apply for the course developer listed above, and attach proof with submission of this form)

TA Experience       Assisted with a minimum of 3 classes       CEC in the field of study

8 years experience in Education/Practice/Teaching       Bachelor’s Degree related to field of study

Minimum of 3 year’s Experience in the field of study/modality

Certified by the National Certification Board for Therapeutic Massage and Bodywork as an Approved Provider for Continuing Education or similar body pertaining to the field of study.

FOR OFFICE USE ONLY	
Date Approved _____	
RMT	MOT
Credits _____	Credits _____
CEC Class:	CEC Class:
<input type="checkbox"/> Professional Skills	<input type="checkbox"/> Professional Skills
<input type="checkbox"/> Online	<input type="checkbox"/> Online
<input type="checkbox"/> Complementary Training	<input type="checkbox"/> Complementary Training
<input type="checkbox"/> Personal Interest Training	<input type="checkbox"/> Personal Interest Training



## **Additional Documentation Required**

### **Please Provide:**

- Proof of Certification(s)** related to field of study: (Please provide copies of the course developer's certifications related to the course)
- Course Developer Biography / Resume** that clearly outlines expertise and education to adequately teach this course, along with any certifications that support the training obtained to be teaching this course.
- Contraindications & Safeties** a full list is required.
- Hourly outline** of course length, including lunch and breaks for all days
- Detailed description of course**, including what the participants are taught, what they will learn, clinical skills after completion, any additional skills learned throughout the course, and method of learner evaluation.
- Sample copy of the Certificate of Completion** this is for insurance purposes only and to ensure we have the correct name for the course.

Course Developer Continuing Education Credits Evaluation Requests by members are subject to a fee of \$35 or by non-members are subject to a fee of \$70 per course as prescribed in the CMMOTA Fee Schedule. This fee MUST be paid PRIOR to the course being reviewed for approval. If the course is approved for CEC's, you will receive the opportunity for a one time \$10 discount on graphics advertising in our weekly CMMOTA Knead to Know members newsletter.

### **Payment:**

Payment: Please E-Transfer to [payments@cmmota.com](mailto:payments@cmmota.com) and make the security answer **membership**. Please contact our office to arrange another form of payment.

## **Additional Comments for Course Consideration:**

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**DISCLAIMER** - Should the Association (CMMOTA) choose to recognize this course as value for continuing education credits, it does not mean that any professional liability insurance provider will recognize the course as substantive for providing coverage for the practice of a modality or technique which may be attained within the training received. Further, the Association (CMMOTA) shall hold no responsibility nor liability for the content or accuracy of information which may be presented through this continuing education course, nor is approval of continuing education credits to be taken as an endorsement of the continuing education course, nor does any material presented through the continuing education course necessarily represent the views, values, or mission of the Association (CMMOTA).



## **Continuing Education Guidelines for New Courses for Course Developers**

### **New Course Guidelines and Checklist:**

Qualifying: Course Developer must meet ONE (1) of these listed credentials (please attach proof):

- Must have Three (3) years of professional practice related to the specific field of study **AND** must have Educational Certification with a minimum of two (2) completed courses related to the specific field of study.
- Must have Three (3) years of professional practice related to the specific field of study **AND** must have two (2) letters of support from reputable Colleagues (aka Peer Review)
- Must have Education Certification with a minimum of two (2) completed courses related to the specific field of study **AND** must have two (2) letters of support from reputable Colleagues (aka Peer Review)
- Eight (8) years of Professional Practice related to the specific field of study/modality (Letter of Good Standing from Association OR Certificates of Association Membership accepted as proof)
- Educational Certification with a minimum of three (3) completed courses related to the specific field of study (modality), one (1) of which includes some sort of training to be a workshop facilitator
- Has been certified by the National Certification Board for Therapeutic Massage and Body Work as an Approved Provider for Continuing Education (US Designation)
- Recognized in the field of study as an expert (only for courses not classified as technique/modality/refreshers in nature)

\* Please ensure all the information provided is accurate.

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- No, I do not wish to receive emails from CMMOTA about advertising, events, and updates.

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- **Event Information:** Get early access to relevant events and networking opportunities that can enhance your reach and influence.