



CEU APPROVAL GUIDELINES

Introduction

The School Nutrition Association (SNA) offers Continuing Education Unit (CEU) approval guidelines for school nutrition education programs. These education programs may then be used by SNA Certified (Levels 1, 2, or 3) and SNS Credentialed professionals for certification and credential renewal.

The CEU Approval Form, payment, and required attachments must be submitted to SNA for review 6-8 weeks prior to offering the program. Once the program is approved, SNA will send notification via email which will include a certificate template. Each participant must receive documentation of completion for the approved CEU Program.

Continuing Education Units

Continuing Education Units (CEUs) are earned for participating in job related activities such as conferences, workshops, online courses, webinars, or in-service trainings that provide ongoing professional development. Note that exhibits, tours, food shows and tradeshow qualify for 1 CEU only.

CEUs:

- Must be at least 1 hour of instructional time (*does not include registration time or breaks*)
- Can be broken down into modules and bundled (*i.e. four 15 minute sessions or two 30 minute sessions*)

Application Fees - Completed CEU Approval Forms received less than 6 weeks prior to the program will need to include a \$50 rush fee along with the correct application fee listed below.

Approved Providers:
Nutrition (SNF), SNA State State Agencies/State

Program Minutes	Hours Awarded	*SNA Approved Education Providers	Individuals, School Districts or Associations	Industry Members
60 – 300	1 – 5	\$0	\$50	\$70
306 – 600	5.1 – 10	\$0	\$75	\$100
606 – 900	10.1 – 15	\$0	\$100	\$120
906 – 1200	15.1 – 20	\$0	\$105	\$125
1206 – 1500	20.1 – 25	\$0	\$125	\$145
1506 – 1800	25.1 – 30	\$0	\$145	\$165
1806 or +	30.1 or +	\$0	\$165	\$185

*SNA Education School Foundation Affiliates,

Department of Education (DOE), US Department of Agriculture (USDA), National Food Service Management Institute (NFMIS), Academy of Nutrition Dietetics (AND), Dietary Managers Association (DMA).

Submitting Application (If paying by credit card please fax the completed form and attachments.)

If this is a national conference, national program or being held in more than one state, please mail or fax the completed CEU Approval Form, application fee, and required attachments to SNA Headquarters:

Mail to: School Nutrition Association
Attn: Education
120 Waterfront Street, Suite 300
National Harbor, MD 20745

Fax to: (301) 686-3115
Attn: Education

Email: education@schoolnutrition.org

If this program is being held in only one state, you must complete a different application. Please contact SNA at education@schoolnutrition.org or call (800) 877-8822 for the correct form to complete. (Application on the following page)



CEU APPROVAL FORM

Due 6-8 weeks prior to program date. Applications submitted less than 6 weeks prior to program date must include a rush fee of \$50 along with the application fee.

(Please Print or Type)

Program Provider: _____

Address: _____

City, State & Zip: _____

Contact Person: _____

Phone: _____ Fax: _____

Email: _____ Signature: _____

<p>For MSNA Use Only</p> <p>Received: _____</p> <p>Processed: _____</p> <p>Hours approved: _____</p> <p>Hours requested: _____</p> <p>Approved by: _____</p>

PART II - PROGRAM DETAILS

Program Title: _____

Program Dates: _____

Locations (City, State): _____

CEUs Requested: _____ (minimum 1 hour of instructional time - do not include registration time or breaks)

Program Type: Workshop Conference Webinar Online

*Home Study - Participant must complete a test documenting course completion. The test must be submitted to the educational provider for grading.

PART III - REQUIRED ATTACHMENTS (All attachments must be submitted along with the CEU Approval Form)

- Program Description
- Learning Objectives
- *If Home Study – copy of test
- Program Evaluation Form
- Copy of Presentation (Handouts, PowerPoint)
- Program Agenda (Sessions & times, registration, breaks, meals)
- Speaker Bio (Qualifications/Degree/Current Position)

PART VI - PAYMENT (If paying by credit card, please fax the completed application and attachments)

Check (Make payable to SNA) Visa MasterCard AMEX Discover

Name on Credit Card: _____ Expiration Date: _____ Security # _____

Card Number: _____ Signature: _____

Amount Enclosed: \$ _____

<p>Mail to: Professional Development Chair Misty Newland, RDN, LDN 1400 West Geo Space Drive, Independence, MO 64056 Misty_Newland@idschools.org</p>	<p>Submit payment to: Missouri School Nutrition Association, MSNA CEU 2100 J-70 Drive Southwest Columbia, MO 65203</p>
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