



Educational Endorsement Program (EEP) APPLICATION FOR EDUCATIONAL ENDORSEMENT/CECs

Today's Date: _____

New Application

Online Courses and Webinars:

- Under two hours
- More than two hours (How many hours? _____)

Face-to-Face Conference/Event:

- One-day conference/event
- Two-day conference/event
- Three-or-more-day conference/event

For Office Use Only

Person Initiating Request

First Name: _____

Last Name: _____

Title: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

E-mail: _____

ACA Member # (if applicable): _____

Organizational Information

Organization Name: _____

Web Site: _____

Is organization:

a nonprofit? Yes No

an ACA Business Affiliate (BA)? Yes No

(If no but wish to become a BA and receive a discount, visit

www.acacamps.org/pdc/educational-endorsement-program/businesses to learn about this option)

Program Information

Title: _____

Dates (if applicable): _____ Location (if applicable): _____

Web link to course curriculum (if online course/webinar): _____

Program Organizer (primary contact): _____

Contact E-mail: _____

Sponsoring Organization (if any): _____

Description of Target Audience: _____

Number of Educational Content Hours Available to a Participant: _____

Goal of This Educational Program:

Specific Learner Outcomes (i.e., educational objectives). Identify (3) specific three learner outcomes.

1. _____
2. _____
3. _____

Describe Your Program Evaluation Process:



Instructor/Presenter Bio and Qualifications (Attach additional pages if necessary):

Name: _____
Title: _____
Qualifications: _____

Name: _____
Title: _____
Qualifications: _____

Name: _____
Title: _____
Qualifications: _____

Name: _____
Title: _____
Qualifications: _____

Program Content

Identify the Content Areas Most Closely Related to Your Educational Program (Check all that apply):

- Youth and Adult Growth and Development.....
- Learning Environment and Curricula
- Program Planning.....
- Participant Observation, Assessment, and Evaluation.....
- Professionalism and Leadership.....
- Health and Wellness
- Risk Management.....
- Cultural Competence
- Families and Community Connections
- Nature and Environment
- Business Management and Practices.....
- Human Resources Management
- Site and Facilities Management

Calculate Educational Endorsement Fee

(A nonrefundable administrative fee of \$40 is included in this fee.)

Check one

- Online Courses and Webinars
 - Under 2 hrs (BA= \$75); (non-BA= \$125)
 - Each additional hour (BA= \$50); (non-BA= \$100)
- Face-to-Face Conferences/Events
 - 1 day (BA= \$75); (non-BA= \$125)
 - 2 days (BA= \$100); (non-BA= \$200)
 - 3+ days (BA= \$200); (non-BA= \$300)

TOTAL \$ _____

Method of Payment

Check or money order (U.S. funds only) payable to: American Camp Association

Please bill my: MasterCard VISA Discover AmEx Expiration Date _____ CVV No.* _____

Card Number _____/_____/_____

Name on Card (Please print clearly) _____

Signature _____

*3-digit card verification number on back of card. For AmEx, this is 4-digits.

Program Description

(For use by ACA when educational endorsement is granted)

Provide a short description (100 words max) of your educational program: (ACA will use this description to promote your program on the ACA Professional Development Center Web page.)

Provide a URL link to your educational program (if applicable). ACA will use this link to promote your program on the ACA Professional Development Center

Web page: _____



Educational Endorsement Program (EEP)

APPLICATION FOR EDUCATIONAL ENDORSEMENT/CECs

Agreement for Use of the Educational Endorsement Seal

By checking this box, I indicate I have read the information below about the limited license provided to me if my request for educational endorsement for the program described on this application is granted.

Limited License to (EEP NAME). In connection with this Agreement, (EEP NAME) is hereby granted a limited, revocable, non-exclusive license to use the name "Educational Endorsement Program" the acronym "ACA," and the Educational Endorsement seal of ACA (hereinafter collectively referred to as the "ACA Marks"), with the limited authority to use the ACA Marks solely in connection with the activities authorized under this Agreement, subject to the terms and conditions of this Agreement. In no event shall (EEP NAME) use the ACA Marks in a manner that states or implies an endorsement of (EEP NAME's) other products or services than what is approved in this agreement by ACA. In all uses by (EEP NAME) of the ACA Marks, (EEP NAME) shall ensure that, if so directed by ACA, all applicable trademark and copyright notices are used pursuant to the requirements of United States law and any other guidelines that ACA may hereafter prescribe. Any material failure by (EEP NAME) to comply with the terms and conditions of this limited license, whether willful or negligent, may result in the immediate suspension or revocation of this license, in whole or in part, by ACA and be subjected to liquidated damages. The interpretation and enforcement (or lack thereof) of such terms and conditions, and compliance therewith, shall be made by ACA in its sole discretion.

Liquidated Damages. In the event of any breach, including misuse of the ACA marks, that has remained unresolved for 30 days of this Agreement by (EEP NAME), it shall pay to ACA the sum of Five Thousand U.S. Dollars (US\$5,000) as liquidated damages. ACA and (EEP NAME) acknowledge and agree that such amount is a reasonable estimate of the actual damages which would be suffered by ACA as a result of such breach, and is not a penalty. The parties further acknowledge and agree that in the event of such breach, it would be very difficult to determine ACA's actual opportunities lost and damages flowing from such breach. This liquidated damages payment shall be in addition to, and not in lieu of, any and all other rights of ACA at law or in equity, including any and all rights to recover injunctive relief and additional monetary damages.

Affirmation

By signing and submitting this form, I attest that the information contained in this application is true, complete, and correct to the best of my knowledge. I further attest that this request is submitted in good faith. I understand that if any information is later determined to be false, the ACA Educational Endorsement Committee reserves the right to revoke any previously approved or currently deliberated Continuing Education Credits for the submitted event/activity. I also understand that upon the approval of this event/activity, the name of the official contact person listed herein will be used for advertisement and publication purposes; therefore, those who request information about this event/activity will be referred to the official contact person.

Signature of Official Contact Person: _____

Date: _____

Submit To

Your application can be returned to ACA via mail, fax, or electronic submission. Applications will not be processed until payment is received. If you submit your payment separately from your application, then please photocopy the front page of your application and return with payment.

American Camp Association
Educational Endorsement Program
5000 State Road 67 North
Martinsville, IN 46151-7902

765-342-8456 (Phone)
765-342-2065 (Fax)

www.ACAcamps.org/pdc/educational-endorsement-program

Submission Checklist

- ✓ Submit application at least two months prior to the planned educational program date (the earlier, the better)
- ✓ For face-to-face conferences/events,
 - Attach a brochure/flyer for your educational program (showing date, time, session titles)
 - Include an hour-by-hour schedule with session descriptions
- ✓ For online course/webinar, url link to course/curriculum
- ✓ Provide the application and supporting materials via electronic documents
- ✓ Applications will not be processed until payment is received. If you submit your payment separately from your application, please photocopy the front page of your application and return with payment
- ✓ Allow 2-4 weeks for processing, at which time you will receive further information about your endorsed program