Reinstatement Application - Continuing Education Attestation

The following **attestation must be signed**, and the required information must be **typed or legibly printed** in the table below, in order to apply for reinstatement of licensure. Further, the enclosed CONTINUING EDUCATION ATTESTATION FORM must be completed and submitted along with applicable documentation of the continuing education hours listed below. In the tables below, write names and dates of programs/activities and the corresponding hours to show that you have met the **MINIMUM** requirement of **24 HOURS**. A **minimum of 15 hours MUST** meet **Category A** requirements, which must include **3 hours in the area of ethical and legal issues in the professional practice of psychology. Further information about the CE requirements is available on the Board web site at www.ncpsychologyboard.org.**

| Name of Category A Program/Activity: | | Date | Hours |
|---|----------------|---------------|---------------|
| Check (7) here if program covered ethical/legal issues in the practice of psychology | 7 | | |
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| *Must have a minimum of 15 hours* | | Total: | |
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| Name of Category B Program/Activity: (no sponsorship requirement, but must fall within appropriate topic area | s): | Date | Hours |
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| *May have a maximum of 9 ho | ours* | Total: | <u> </u> |
| I attest that I have completed, as listed above, a minimum of 24 continuing education hours during the tw | | | the data of |
| application for reinstatement of licensure, as required by Rule .2104 of Title 21, Chapter 54 of the North Carolina | Admini | strative Code | . Included in |
| these hours, I completed a minimum of 3 hours in the area of ethical and legal issues in the professional practice of print or type) License Number | | ogy. | |
| Signature Date | | | |