



Member Continuing Education Application

Use this form to apply for Continuing Education Units for courses that are not on the pre-approved course list on the MTAS website and also to apply for secondary credits in the eligible categories.

IMPORTANT NOTE: If the course/workshop for which you are applying for credits is a regularly occurring event attended by several therapists, the Course Provider should submit the application (using a separate form) instead of the MTAS member therapist.

Scope of practice: To assess and treat the soft tissues and joints of the body, with the intent of producing a therapeutic outcome.
 To promote rehabilitation and/or prevent or reduce physical dysfunction and pain in the soft tissues and joints.
 To maintain and enhance health.

MEMBER INFORMATION

Name of applicant(s): _____
 Address: _____ City: _____
 Province: _____ Postal Code: _____ Tel: _____
 Fax: _____ E-mail: _____ Website: _____

APPLICATION FOR ASSESSMENT OF COURSE/WORKSHOP INFORMATION

Please use one form for each course/workshop to be assessed – use additional paper as necessary. You may include brochures, course manuals etc. to supplement your application, however all of the required documentation noted below must be provided.

The Con-Ed Committee will determine eligibility for primary or secondary credits, based on the content of the documentation provided to support the application.

Name of organization: _____
 Name of course: _____
 Date(s) and location(s) of training: _____
 Total hours of training (excluding lunch and breaks): _____

Please provide detailed information on the following, in the order listed:

(If this information is not provided, application will be returned unprocessed).**

1. Proposed course content
 - **** Program content - provide a detailed breakdown of time spent of each part of the program (lesson plan).**
 - Learning outcomes - list outcomes in behavioural/measurable terms (which are attainable, can be evaluated, and relate to the scope of practice).
2. Presenter list and biography
 - List presenters for each topic/content area.
 - **** Presenter's specific qualifications for teaching this course, including theoretical background.**
 - Include work experience in chronological order, summary of qualifications and professional memberships, for each presenter.
3. Teaching strategies
 - List strategies/methods used.

SECONDARY CREDITS – ELIGIBLE CATEGORIES

APPLICATION FOR PROFESSIONAL WORK EXPERIENCE (PWE)/INSTRUCTOR CREDITS

Members must apply to receive these credits. 1 credit per 200 hours of work, to a **maximum of 8 secondary credits/window**.

1 day/month x 7 hrs/month x 12 month/year x 3 years = 250 hours.

1 day/week x 7 hrs/day x 48 weeks/year x 3 years = 1000 hours.

5 day/week x 7 hrs/day x 48 weeks/year x 3 years = 5000 hours.

Number of PWE credits you have earned (in the current 3-year window): _____

MTAS PARTICIPATION CREDITS

1 credit per 2 hours of participation, to a **maximum of 8 secondary credits/window**.

Participation in MTAS, state role(s) and number of hours: _____

VOLUNTEER CREDITS

1 credit per 2 hours of work, to a **maximum of 8 secondary credits/window** (must be massage-related).

Name of organization: _____

Date volunteered: _____ Number of hours: _____

Name of organization: _____

Date volunteered: _____ Number of hours: _____

AFFIDAVIT

I confirm that all of the information provided here is true.

Signed: _____ Date: _____

**Please submit copies of all documentation to the MTAS office at the address shown below.
Allow up to 10 weeks for completion of the assessment process.**

OFFICE USE ONLY

Reviewed by: _____ Date: _____

Approved

Not approved

Primary credits: _____ Secondary credits: _____ Total credits: _____