ACCREDITATION APPLICATION

Re-accreditation Application for Classroom-based Courses/Curriculum

To apply for accreditation

Complete the APPA Re-accreditation Application for Classroom-based Courses/Curriculum.

Submit the Application and required supplemental materials to:

> **Joshua Nelsen**
> (859) 244-8236
> jnelsen@csg.org

*Electronic submission via email is required.

Review Period

Allow 30-45 days for review.

Cost for accreditation:

APPA Member price: $15.00/contact hour*

Non-member price: $35.00/contact hour*

*Additional costs may be incurred based on the amount of material to review. If additional costs are assessed, APPA will discuss additional costs with the submitting agency **prior** to beginning the review process.

Please do not send payment with application. Payment is due upon determination of re-accreditation and once contact hours are finalized.

BACKGROUND INFORMATION

Organizations or individuals providing training shall be formally organized and should have a commitment to the professional development of probation and parole practitioners. In order to be considered for accreditation by the American Probation and Parole Association, the sponsor/provider must comply with the following criteria as established by the APPA Training Accreditation Committee. The following information is to be completed for the overall training or workshop.

1. Application Date :

2. Submitting agency information

   Submitting Agency:

   Contact Person:

   Address:

   City, State, and Zip:

   Phone:

   Fax:

   Email:

3. Date of *original* APPA accreditation:

4. Date of current APPA accreditation expires:

5. Is this course accredited or seeking accreditation from other accrediting bodies?

   ☐ Yes

   ☐ No

If yes, please indicate what additional accreditations this course has received and/or what accreditations it is seeking. Indicate in the description if the accreditations have been approved or are in progress of being considered.

6. **Course Title**:

7. **Date course completed or revised**:

8. **Type of course** (*check all that apply*):

    ☐ Training course

    ☐ Workshop

    ☐ Other (please specify):

9. **Target Audience** (*check all that apply*):

    ☐ Pretrial staff

    ☐ Probation staff

    ☐ Parole staff

    ☐ Detention/Institution staff

    ☐ State/county

    ☐ Federal

    ☐ Tribal

    ☐ Victim service providers

    ☐ Managers/supervisors

    ☐ Line/direct supervision staff

    ☐ Other (please specify):

10. **Number of learners expected to take this course**:

11. **Dates the course will be made available**:

    Start Date:

    End Date:

    If course availability dates are unknown, please explain:

COURSE DELIVERY PLAN

1. Please describe how this course will be delivered (e.g., at a Training Academy, at a conference, as a standalone event, etc.).

2. This course is designed for

   ☐ Open/public access

   ☐ Restricted users (please describe):

3. This course will be provided:

   ☐ Free

   ☐ For a charge (please indicate cost of course):

4. This course will be marketed/promoted via the following types of methods:

REQUIREMENTS FOR SATISFACTORY COMPLETION/REQUESTED CONTACT HOURS

Each course must have specific requirements for satisfactory completion.

1. Please indicate the course components that learners **MUST** complete to satisfactorily complete the course (check all that apply).

    ☐   Pre-test

    ☐   Mid-course/module exams (passing score =   )

    ☐   Post-test (passing score =   )

    ☐   Post-course evaluation/survey

    ☐   View/Access specific lesson files

    ☐   Other (please specify):

2. Previous number of contact hours for which this course/curriculum was accredited by APPA:

3. Requested number of contact hours for re-accreditation (based on clock hours of classroom-based training, minus breaks):

    If there is a change from the original number of contact hours accredited, please explain the difference.

    Note: APPA will be responsible for determining and assigning the final approved contact hours to this course.

4. At a minimum, the course should provide learners with a certificate of completion which includes:

- Course Title
- Date course completed
- Name of organization
- Name of participant
- Number of contact hours
- Name, title, and signature of authorizing person at agency providing the training

Please attach a copy of the template for the certificate of completion to the accreditation application package.

☐ Sample certificate attached

TRAINING NEEDS ASSESSMENT

The training or workshop must be responsive to the needs of the target audience and relevant to the learners' professional development, continuing education, and/or job requirements. Training needs assessments should include the identification of the gap between what the learner knows and what the learner needs to know.

1. Methods used to determine needs:

   ☐ Survey

   ☐ Interview key individuals

   ☐ Management performance analysis

   ☐ Focus group

   ☐ Review existing data

   ☐ Other (please specify):

2. Brief description of the process for how training needs were assessed:

3. Overview of the results of the training needs assessment:

COURSE CONTENT

The content and instructional methodologies used for courses should adhere to adult learning principles, be consistent with stated learning objectives, be sequenced to facilitate learning, and permit opportunities for the learner to practice and apply information learned and receive feedback.

1. Course Outline

   ☐ There were **no** changes made to the course outline since the original accreditation.

   ☐ There were changes made to the course outline

Please provide a general course outline that identifies the major topics and subtopics included within the course. **If changes were made to the original accredited course outline, please clearly note the changes that were made.**

2. Learning Objectives

   ☐ There were **no** changes made to the learning objectives since the original accreditation.

   ☐ There were changes made to the learning objectives.

The course must have clear and concise written statements of intended learning outcomes (e.g., measurable behavior performance objectives) for each module/section of the course. The learning objectives should indicate *what participants will be able to do after completing the course*. The intended learning outcomes should focus on growth in the learners' knowledge, skills, and abilities during or after course completion and be limited to those that can be assessed through a post-test or other appropriate assessment. Bloom's Taxonomy is a good reference for developing learning objectives.

If there were changes to the lesson objectives since the original accreditation, please clearly note the changes that were made.

3. Course Content

☐ There were **no** changes made to the course content since the original accreditation.

☐ There were changes made to the course content.

Please provide a copy of the curriculum that provides detailed course content that demonstrates to reviewers the specific nature of the information that is being provided in the course, how the course is sequenced, and how the course applies adult learning principles. For example, the curriculum must include an agenda (that includes specific time frames allotted to each topic area and all breaks) and a lesson plan that outlines detailed information on the subject/topic areas, associated talking points, instructional methodologies being used (e.g., lecture, class discussion, activity, video, etc.), and approximate time frames for each section and overall lesson/module. Copies of handouts and/or participant manuals used for the course also should be included, if applicable.

If there were changes to the course content since the original accreditation, please clearly note the changes that were made to the appropriate documents.

Detailed course content information should be attached as a separate document(s) to the application. Please indicate the type of course content that is attached to this application (check all that apply).

☐ Agenda (required)

☐ Lesson plan/Trainer's Manual (required)

☐ Participant Manual

☐ Handouts

☐ Audio/Visual (e.g., PowerPoint slides, video)

☐ Other (please describe)

If you have any additional comments, information, or clarification regarding the course content (or lack of specific types of content) you feel would be helpful to reviewers when reviewing the information provided, please submit it below.

EVALUATION

A process must be established to evaluate major aspects of the continuing education/professional development experience and the extent to which intended learning objectives were achieved.

1. Assessment of Learning Outcomes

Courses must include method(s) for assessing the intended learning outcomes or performance objectives. Please indicate which assessment techniques will be used in this course (check all that apply):

- ☐ Pre-test (attach a copy)
- ☐ Post-test (attach a copy)
- ☐ Demonstration
- ☐ Role play
- ☐ Case Study
- ☐ Individual activity with a final product
- ☐ Group activity with a final product
- ☐ Role play
- ☐ Oral test (attach a copy of questions or process)
- ☐ Reflections
- ☐ Other (please specify):

2. Course Evaluation

Applicants also must include information on the methods used for learners to evaluate the course design and their perception of whether the course achieved its intended learning objectives.

- ☐ Post-course participant evaluation/survey (attach a copy)
- ☐ Follow up interviews (please describe)
- ☐ Other (please specify):

INSTRUCTOR/COURSE AUTHOR/SUBJECT MATTER EXPERT INFORMATION

Course content must be written or provided by competent individuals as documented by appropriate academic training, professional licensing, certification or professionally recognized experience. Please provide information on the course instructor(s), author(s), and or subject matter expert(s) used in the development and/or delivery of this course. **You also must attach a resume or curricula vitae for each instructor/course author/subject matter expert to the application package.**

Role (check all that apply):

☐ Instructor

☐ Instructional Designer (course author)

☐ Subject Matter Expert

Name:

Title:

Agency:

Address:

City/State/Zip:

Phone:

Fax:

Email:

☐ Resume/Curricula Vitae attached

Role (check all that apply):

☐ Instructor

☐ Instructional Designer (course author)

☐ Subject Matter Expert

Name:

Title:

Agency:

Address:

City/State/Zip:

Phone:

Fax:

Email:

☐ Resume/Curricula Vitae attached

Role (check all that apply):

☐ Instructor

☐ Instructional Designer (course author)

☐ Subject Matter Expert

Name:

Title:

Agency:

Address:

City/State/Zip:

Phone:

Fax:

Email:

☐ Resume/Curricula Vitae attached

OPTIONAL: Additional Comments/Information

If you have additional comments or information you want to provide relevant to this re-accreditation application package, please describe below.