



Department of Community Affairs
 Division of Local Government Services
Continuing Education Sponsor Agreement
Regular Program Contact Hour Request



INSTRUCTIONS

Complete the application and e-mail it to DLGS.Certification@dca.nj.gov. Please allow up to four (4) weeks for processing. Do not send via mail or fax the application. Applications submitted retroactively may be denied credit at the discretion of the Division.

Sponsors are required to supply attendees with proof of attendance which includes the following information: sponsor name, program name, course number, and the category and number of contact hours awarded. This should be supplied directly after the program or shortly thereafter by e-mail.

Sponsors must have participants sign in. Evaluations must be made available for participants to complete if they so choose. Both the attendance sheet and evaluations must be kept for three (3) years and can be kept electronically. Unless requested, do not send attendance sheets to the Division.

Approvals will be sent via e-mail and a copy should be kept for the sponsor's records. Sponsors will not receive a copy of this form or a formal letter.

SECTION 1 – Sponsor Organization Information

Organization Name: _____

Address: _____

City/Town: _____ State: _____ Zip: _____

Organization Contact: _____

Contact E-mail: _____

Contact Phone: _____

SECTION 2 – Program Details

Title of Program: _____

Date(s) of Program: _____

Program Time: Start: _____ End: _____

Total minutes of program excluding breaks: _____

Type of Program: In Person – Location: _____
 Live Webinar Other – Please Specify: _____

Summary of Program – Provide a summary and attach a detailed syllabus:

Instructor Name(s) – Provide name(s) of instructors and attach a biography for each:

SECTION 3 – AGREEMENT

Must be signed by an authorized representative of the organization sponsoring the event.

By signing the agreement, the sponsor agrees to comply with the Division’s procedures as noted in the instructions.

Signature: _____ Date: _____

Representative Name: _____

Relation to Sponsor: _____

For questions concerning contact hours and sponsor agreements please contact the Certification Unit by e-mail at DLGS.Certification@dca.nj.gov or by phone at 609-292-6613 option #6.

ALLOCATION OF CONTACT HOURS

One (1) contact hour requires fifty (50) minutes of instruction. Contact hours will be issued in half (0.5) increments.

Please specify the number and category of contact hours requesting below.

Certification	Contact Hour Category	Sponsor Proposed Contact Hours	DLGS USE ONLY			
			Approved Contact Hours	Approval		
County Certified Finance Officer (CCFO)	Accounting	_____		<input type="checkbox"/> Approved as Requested <input type="checkbox"/> Approved as Noted <input type="checkbox"/> Not Approved		
	Budgeting	_____				
	County Fiscal Operations	_____				
	Ethics	_____				
	Financial & Debt Management	_____				
	Information Technology (optional)	_____				
Certified Municipal Finance Officer (CMFO)	Office Management & Ancillary Subjects	_____		Date:		
	Accounting	_____			Course Number:	
	Budgeting	_____				Reviewed By:
	Ethics	_____				
	Financial & Debt Management	_____				
	Information Technology (optional)	_____				
Certified Public Works Manager (CPWM)	Office Management & Ancillary Subjects	_____				
	Ethics	_____				
	Government	_____				
	Information Technology (optional)	_____				
	Management Technical	_____				
Certified Tax Collector (CTC)						
	Enforcement	_____				
	Ethics	_____				
	General/Secondary	_____				
	Information Technology (optional)	_____				
	Legislation Reporting/Billing/Collection	_____				
Qualified Purchasing Agent (QPA)						
	Ethics	_____				
	Green Purchasing	_____				
	Information Technology (optional)	_____				
	Office Administrative/General Duties	_____				
	Public Procurement Public Works Compliance (optional)	_____				
Registered Municipal Clerk (RMC)						
	Elections	_____				
	Ethics	_____				
	Finance	_____				
	Information Technology (optional)	_____				
	Licensing Professional Development Records	_____				