

SAPS CME PLANNING GUIDE CHECKLIST

ALL the items on the below checklist must be completed and submitted to SAPS for your organization to receive Accredited Continuing Education credits and certificates of attendance.

ACTIVITY TITLE: _____ DATE: _____ CREDITS: _____

APPLICATION/PLANNING DOCUMENT:

COMPLETED APPLICATION

APPLICATION FEE

PRE-MEETING:

PROPOSED AGENDA

LIST OF FACULTY/PLANNERS

FACULTY/PLANNER AGREEMENTS

DISCLOSURES:

INSTRUCTOR/SPEAKER DISCLOSURES

PLANNER DISCLOSURES

DRAFT OF ALL MEETING MATERIALS (Save the Dates, Brochures, Emails, etc.) .

POST MEETING:

SUBMISSION OF TIMED FINAL AGENDA

FINAL MEETING MATERIALS (Save the Dates, Brochures, Emails, etc.)

FINAL ATTENDEE LIST

(Include name, credentials, and number of credit hours claimed)

SUMMARIZED ATTENDEE EVALUATION FORM

(Must provide ONE report summarizing all attendees' evaluations)

SUBMISSION OF FINAL ACTIVITY BUDGET WORKSHEET

PAID FINAL BALANCE: _____