

# CME Application

This is a two part process. An email, with a link to the second portion, will be sent to you. Only applications with complete information will be approved.

Activity Title\*

The name of your program (i.e. Department of Internal Medicine Grand Rounds)

Department or Organization Name\*

Address\*

City\*

State\*

Country\*

Coordinator or Administrative Assistant completing this form\*

Coordinator or Administrative Assistant Phone\*

xxx-xxx-xxxx

Coordinator or Administrative Assistant Fax

xxx-xxx-xxxx

Coordinator or Administrative Assistant Email\*

Education Planning Faculty Name\*

Education Planning Faculty Phone\*

Education Planning Faculty Email\*

## Activity Date

Reporting Year\*

Start Month/Day\*

End Month/Day\*

Weekday\*

What day of the week is your activity held? (If this is a two day event, select the first day of the event.)

Exception Dates

Are there dates in which the activity does not occur? (i.e. We do not hold events in December.)

Proposed Credit Hours

Please indicate the number of credit hours for the program. CPL Staff will review the program and verify the credits.

Event Occurrence\*

How often do you hold your event?

Other Occurrence

If other occurrences please specify below

Number of activities for the period\*

How many activities do you hold on an annual basis?

Has this activity occurred previously?\*

If this activity has occurred in previously, the Outcome Summary and Evaluation Summary from the previous must be attached to this application.

Yes

No

Location

Where will your activity be held?

## PROVIDERSHIP & ACTIVITY TYPE

Providership - Select the type of event.\*

DIRECT is RSS, Workshop, Course or Conference. JOINT Is for 3rd Party Events.

If this is a JOINT Providership activity, please provide the company name.

Activity - Select the type of activity.\*

C - is for Workshops, Courses and Conferences

IEM - Online Courses

IL - Webinar

J - Joint

RSS - Regularly Scheduled Series

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## FACULTY DISCLOSURE & CONFLICT OF INTEREST

Each presenter and program planner must complete an online Faculty Disclosure form prior to the activity. If presenters or planners do not complete a disclosure statement prior to the activity, they will be disqualified from presenting, or the activity will not be certified for CME credit. The disclosure information needs to be provided to the audience in writing, whether the faculty has a financial relationship or not. This can be done in a written disclosure statement given to the participants at the activity. If there is a conflict of interest, contact CPL Staff, so they can provide you with the steps to resolve the conflict.

I have read and understand the Financial Disclosure process.\*

## COMMERCIAL SUPPORT

Commercial Support\*

Will the activities be supported by funds from the manufacturer of drugs, devices or services?

Yes

No

Commercial Support Source

(Exhibitor Name)

Monetary Amount Received

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## Commercial Support Received

If receiving commercial support, please check all boxes below that apply for the kind of support received

Durable Equipment

Facilities/Space

Disposable Supplies

Animal Parts or Tissue

Human Parts or Tissue

Other Support

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## HONORARIUM:

The UNM School of Medicine has official honorarium guidelines. Our guidelines can be found here: <https://app.box.com/s/lm32m4rj9qzswdcn41ogqiu389foftow>

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## EVALUATION:

Programs must be evaluated at least twice per year. (Please see our sample Evaluation for the required items. You are encouraged to add items to evaluate outcomes specific to the goals of your program.) • Programs designed by blocks/themes can be evaluated per block/theme. • Individual copies of the completed evaluations are no longer accepted. The data must be compiled into a summary and uploaded to our system.

We have an Excel Spreadsheet that is formatted to follow our evaluation form. It can be found here: <https://app.box.com/s/tm5d77h6hu6m5xtumh0imt1bpg3lisy>

### Program Evaluated

Per Session

Weekly

Monthly

Quarterly

Semi-Annually

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## ATTENDANCE:

The department/organization is responsible for submitting attendance records through our Smartsheet System. Registrations will be accepted 15 minutes prior to the event, during the event and 15 minutes after the event, unless special permission has been given.

I have read and understand the Attendance process.\*

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## ACCREDITATION STATEMENT:

Double check your announcement to ensure it has the current statement, along with the correct number of hours. The accreditation statement must be listed on your announcement. The current accreditation statement can be found here: <https://app.box.com/s/p9esz7a0nma46t132ttckmgft3sgj5z5>

### File Attachments - PDF's are Preferred\*

Items to be uploaded:

An Announcement Template with agenda, disclosure statement & accreditation statement.

## Application Deadlines:

Regularly Scheduled Series (aka Grand Rounds): • October 12, 2020 (January 1 - December 31, 2021).

One Time Events (Conferences/Courses): • 30 Days prior to event.

CME Application, Rev. 11-26-19