ACVAA PROGRAM ENDORSEMENT APPLICATION

1) ☐ Provide the name of the organization, group or individual(s) requesting ACVAA endorsement of the program's certificate(s) in anesthesia or perioperative pain management.

2) ☐ Provide a copy of the certificate which will be granted upon successful completion of the training.

Note: The title of the course/training listed on the certificate must be specific and accurately reflect the scope and level of training as well as accurately reflect the course/training content examined.

3) ☐ List the number of hours of instruction required for certificate

   _____ Lecture _____ Lab _____ Supervised Clinical Activity

   _____ Web-Based Instruction _____ Discussion Group/Round Table

Note: To be considered, training or CE programs must consist of a minimum of 12 hours of instruction (1 hour consists of 50 minutes of instruction or training). Promotional or self study programming will not be considered. Web-based programs must be accompanied by an appropriate availability of the instructor(s) for answering questions concerning program content.

4) ☐ Provide a copy of the course or curriculum outline

5) ☐ Provide a copy of the final examination (consisting of referenced questions testing the knowledge specifically presented by the certificate program).

6) ☐ List the instructors expertise and credentials. A copy of each instructors CV or resume should be attached.

7) ☐ Provide a list of teaching materials and resources used in preparing the educational program. Use of copyrighted materials must be accompanied by permission for use by the certificate granting program.

8) ☐ Provide the names of at least 2 ACVAA diplomats providing program oversight through either review or direct involvement in the certificate-granting program's development, instruction, examination and trainee evaluation.
9) □ Describe the recertification requirements of the program's certificate holders (which must occur at a minimum of every 5 years).

Note: Recertification requirements may vary but must ensure continued current knowledge and skills within the area(s) of anesthesia or perioperative pain management for which the certificate was initially awarded.

10) □ List the method(s) by which your organization or group will provide a public database (e.g. website) of all current certificate holders of the ACVAA endorsed program. Please specify the website address or publication name so the information can be verified.

11) □ Please provide the statement that the Certificate granting program is using on its advertising, public website, and/or certificates to clearly define the training and skills acquired by the certificate holder's successful completion training.

Note: The language used must accurately reflect the the specific program content offered (whether broad or limited in scope).

12) □ By signing this application, an authorized representative of the Certificate Granting Program certifies that program certificate holders have been required to comply with the AVMA Principals of Veterinary Medical Ethics. Please attach a copy of the Certificate Granting Program’s code of conduct if available.

13) □ Specify the location (e.g. website address) where the publicly accessible list of certificate holders and their certification status can be verified.

14) □ Provide the statement used by the Certificate Granting Program which explains the differences between their certificate and the diploma of any AVMA-recognized specialty organization. Provide the public location where this statement is published.

15) □ Include a non-refundable check for $500.00 payable to the American College of Veterinary Anesthesia and Analgesia or ACVAA with the application.

16) □ Include the name(s), address, email address, and phone number of a representative of the Certificate Granting Program who may be contacted by the ACVAA for questions or if additional information is needed to process this application.
Authorized Signature:

By signing this application, the authorized representative certifies that the information in this application is accurate, and that the Certificate Granting Organization agrees to adhere to the ACVAA Certificate Program Endorsement Guidelines. It is also acknowledged that the Endorsement is conditional upon continued adherence to the Guideline requirements and that Endorsement may be revoked at anytime if the ACVAA Board of Directors determines that the Certificate Granting Organization is not acting in an ethical or professional manner, or fails to meet the Guideline requirements.

________________________________________   _______________________
Print Name       Title

________________________________________   _______________________
Signature       Date