

## **SB-CEU APPLICATION INSTRUCTIONS**

**Please read instructions prior to completing application.**

**Please type all information onto form. Do not write or print.**

**Please detach instruction sheet prior to submitting application to MDE.**

### **Update/Renewal Application Instructions**

Complete items numbered 1-5 and 12 as well as the signature section located on page one of the application. Also complete the dates/locations on page 2. If there is a change in presenter(s), please submit appropriate presenter information.

### **SB-CEU Program Approval Application Instructions (New Program)**

1. Sponsor Name: Always use the sponsor name that was originally approved.
2. Sponsor I.D.: Assigned by M.D.E. to all approved sponsors. Includes a letter plus six digits. Proofread this number for correctness. It is a good idea to type this number on the form when you run duplicates – along with sponsor name, telephone number, etc.
3. Program Number: this is the approval number that is assigned by M.D.E. when the application is approved. An approval letter will follow approximately 10 days after the application arrives.
4. No. of SB-CEUs: Determined by dividing the number of contact hours (training hours) by the number 10 and indicating it to the tenth decimal place (i.e., 1.0, .5, 2.4). Do not round decimals. Thus, 18 hours of training equals 1.8 SB-CEUs. Applications must have a minimum of five hours of training.
5. Program Title: Please keep title under 35 characters. Longer titles are lost due to data input limitations.
6. Target Audience: Check all boxes that apply.
- 7.&8. Needs Assessment: May be an informal or formal assessment. Planning meetings involving representative from target populations will satisfy this part of the application. Indicate the month and date that the meeting occurred.
9. Presenters & Resumes: Number of presenters is limited to 99.
10. Conference: Enter a (2) if it is a traditional workshop, inservice, or training session. Enter a (1) if it is structured like an annual conference with breakout sessions at different hours.
11. Program Descriptors: Choose a two-digit number that generally describes the training. Enter at least one, but not more than two, numbers from the program descriptor sheets. See pages 4 & 5 for selected codes.
12. Beginning & End Offering Dates: On line 1, type first day of training under “beginning date” and the last day of training under “end date”. If training is only one day, beginning and ending dates will be the same. If training spans more than one day, list the range (e.g., 5-8-92 to 7-8-93). This range is considered one offering. If the same training will be repeated in total, then list each repetition on a different line. Four repetitions, for example, would be listed on lines 1, 2, 3, and 4. Use county code numbers to indicate where training will occur. County codes are listed on page 6.
13. College or SB-CEU Credit: Enter (1) if option exists for college credit (identify college). Enter (2) if training allows SB-CEU credit, but not college credit. If option exists for college credit, it is important that sponsor type the following phrase anywhere on the application: “Participants are eligible for either SB-CEU or college credit, but not both because it is a duplication of credit.
14. Number of Program Offerings: Enter (1) if the entire training program will be offered once. If the same training will be offered more often, then list the number of times. Every repetition of the training is considered another offering. Finally, all offerings must provide the same content, number of contact hours, and number of SB-CEUs.

15. Contact Hours: The actual time used for instruction. **One contact hour equals 60 minutes.** Do not count breaks, lunch or dinner speeches, homework, preparation time, registration, organizational functions, or similar non-instructional activities. Do not round and use whole numbers only.

16. Originating District & Contact Person: Please complete this section if originating school district is submitting application to the local ISD or ISD consortium for preapproval.

Signatures: All signatures on page 1 must be original, not stamped or photocopied. The use of blue or red ink is preferred.

SB-CEU Program Sponsor: Is always signed by the authorized SB-CEU individual. Other persons assisting in the coordination and training should not sign.

I.S.D. Preapproval: Only the authorized SB-CEU preapproval coordinator for the ISD may sign this form.

## PROGRAM APPROVAL APPLICATION FOR STATE BOARD – CONTINUING EDUCATION UNITS (SB-CEU)

NEW (Complete ALL items)    
  UPDATE\*    
  RENEWAL\*

\*Applicants marking either of these two boxes need to complete items 1–5 and 12 below and Dates/Locations on page 2.

**\*PLEASE TYPE ALL INFORMATION ONTO FORM. DO NOT WRITE OR PRINT.**

1. SPONSOR NAME (must be submitted by an approved SB-CEU sponsor) <b>Western Michigan University</b>		TELEPHONE--AREA CODE/NO./EXT <b>269.387.4174</b>
2. SPONSOR ID NO. <b>C002330</b>	3. PROGRAM NO.	4. NO. OF SB-CEUs
5. PROGRAM TITLE		

6. TARGET AUDIENCE: (Check all that apply.)   
 TEACHERS   
 ADMINISTRATORS   
 SCHOOL PSYCHOLOGISTS

7. NEEDS ASSESSMENT: *Required to determine need for training. Representatives of target training group should be involved in the planning process. Check at least one of the assessment methods used.*

SURVEY   
 AD HOC COMMITTEE   
 PLANNING COMMITTEE   
 OTHER \_\_\_\_\_

8. MONTH AND YEAR ASSESSMENT WAS CONDUCTED: \_\_\_\_\_ Month \_\_\_\_\_ Year

9. NUMBER OF PRESENTERS:    
 10. CONFERENCE? (1=YES; 2=NO)    
 11. PROGRAM DESCRIPTORS: (from Page 4)

12. Complete the following for each program offering (in chronological order). Specific information on dates and locations must be provided on the reverse side of this form.

No.	Begin Date Month/Day/Year	End Date Month/Day/Year	County Code 2 Digits (from p. 6)
01			
02			
03			
04			
05			
06			

13. Is this program also offered for college credit?   
*(If "Yes", list college below.)*    1=Yes  
 2=No

14. Total Number of Program Offerings:

15. Total contact hours per program offering:   
*(whole numbers only—no decimals)*

16. Originating District (if not the approved sponsor)

Contact Person \_\_\_\_\_ Date \_\_\_\_\_

Mailing address \_\_\_\_\_ E-mail \_\_\_\_\_



**IMPORTANT NOTICE FOR K-12 SCHOOL DISTRICTS THAT ARE APPROVED SB-CEU SPONSORS.**

Submit this application directly to your ISD for preapproval if your ISD has been authorized to preapprove SB-CEU applications.

SIGNATURES

SB-CEU Program Sponsor \_\_\_\_\_ Date \_\_\_\_\_

ISD Pre-Approval \_\_\_\_\_ Date \_\_\_\_\_

### DATES(S)/LOCATION(S) INFORMATION

Name of Facility and Exact Location/Address	City	Dates in Chronological Order			Times From To	
		Mo	Da	Yr	AM/PM	AM/PM
<b>FIRST OFFERING</b>						
Day 1						
Day 2						
Day 3						
Day 4						
Day 5						
Day 6						
Day 7						
Day 8						
<b>SECOND OFFERING (2nd Repeat of 1st Offering)</b>						
Day 1						
Day 2						
Day 3						
Day 4						
Day 5						
Day 6						
Day 7						
Day 8						
<b>THIRD OFFERING (3rd Repeat of 1st Offering)</b>						
Day 1						
Day 2						
Day 3						
Day 4						
Day 5						
Day 6						
Day 7						
Day 8						

*(Duplicate page for additional program offerings. Begin with "Fourth Offering.")*

**OVERALL GOAL/OBJECTIVE OF PROGRAM**

Include 3-5 sentence narrative of the program telling the goals/objectives.

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**PROGRAM AGENDA**

The agenda should show precise hour-by-hour activities so that instructional (contact) hours may be verified. Training session longer than two and a half hours must include a 15 minute break. Welcome, breaks, and meal times are not included in the contact hours. Describe other aspects of the training such as methodologies, instructional aids, learning materials, etc., to identify the specific training proposed. (Please attach a copy of the agenda.)

**PARTICIPANT EVALUATION**

Participants will be required to complete an online evaluation by the MDE. They will receive an e-mail message with instructions for completing the evaluation.

**SB-CEU Program  
Descriptor Codes  
03/05/2010**

**Code Description**

238 Accreditation Review/Site Visit Team

**109 Adult Education**

202 Adult Learning Styles

**055 Agriscience and Natural Resources**

226 AIDS Education

**348 Art Education**

368 Visual Arts Education

204 Behavior Management Styles

203 Brain Development Theories

**300 Bilingual Education**

302 Bilingual Arabic

304 Bilingual Chaldean

306 Bilingual Chinese

308 Bilingual Filipino

310 Bilingual French

312 Bilingual German

314 Bilingual Greek

316 Bilingual Hebrew

318 Bilingual Italian

320 Bilingual Japanese

322 Bilingual Korean

324 Bilingual Other

326 Bilingual Polish

328 Bilingual Russian

330 Bilingual Servo-Croatian/Bosnian

332 Bilingual Spanish

334 Bilingual Vietnamese

**066 Business Education**

067 Accounting

068 Business Administration

336 Business, Management, Marketing & Technology

070 Marketing Education

069 Secretarial Science

**246 Career and Technical Education**

093 Vocational Family & Consumer Sciences

225 Career Counseling for Students

219 Child Psychology

**344 Communication Arts**

205 Communication Skills

**103 Computer Science**

222 Curriculum Development

206 Discipline in the Classroom

007 Drama

100 Driver and Safety Education

**346 Educational Technology**

**102 Environmental Studies**

**058 Family and Consumer Sciences**

**059 Fine Arts**

**088 Gifted/Talented**

**405 Grade Level**

105 Early Childhood Education

106 Elementary

107 Middle School/Junior High School

108 Secondary/Senior High School

354 Guidance and Counseling

**355 Health, Physical Education, Recreation and Dance**

060 Health

061 Physical Education

062 Recreation

063 Dance

231 Human Development/Socialization of Children and/or Adolescents

**356 Humanities**

358 Philosophy

360 Study of Religions

235 IACET Authorized Training

**056 Industrial Technology**

208 Instruction Theory/Methods

209 Issues Management

**001 Language Arts**

002 English

003 Journalism

004 Speech

005 Reading

218 Leadership Skills

210 Learning Styles

**101 Library Media**

201 Management/Supervision Skills

**035 Mathematics**

065 MDE Comprehensive Health Program

223 Media Utilization

229 Mentoring Training Program

234 Miscellaneous Content/Non-Content

217 Multicultural Education

**057 Music Education**

236 MVU Authorized Training--approved via Michigan LearnPort

**362 National Board Certification**

239 Administrator/Principal--Mentoring

440 School Committee

240 School Counselor--Supervising

242 School Counselor--Mentoring

442 School Improvement Committee (PA 25)

244 School Psychologist--Mentoring

**SB-CEU Program  
Descriptor Codes  
03/05/2010**

232	School Psychologist--Supervising	<b>375</b>	<b>Vocational Bus, Mgmt, Marketing &amp; Tech Pathway</b>
233	Teacher--Mentoring	091	Vocational Business Services
248	Teacher--Supervising/Cooperating	376	Vocational Hospitality
221	Outdoor Education	092	Vocational Marketing Education
212	Parent/Community Relations	<b>380</b>	<b>Vocational Eng, Manu, Indus, &amp; Tech Pathway</b>
230	Personnel Hiring or Evaluation	450	Vocational Technical
200	School Administration	<b>342</b>	<b>Vocational Family and Consumer Sciences</b>
214	School Improvement	<b>382</b>	<b>Vocational Health Sciences Pathway</b>
<b>025</b>	<b>Science</b>	350	Vocational Health Services
030	Astronomy	<b>384</b>	<b>Vocational Human Services Pathway</b>
026	Biology	386	Vocational Child Care
027	Chemistry	388	Vocational Cosmetology
029	Earth/Space Science	390	Vocational Law Enforcement/Fire Science
364	Integrated Science	<b>392</b>	<b>World Language &amp; Culture</b>
366	Physical Science	043	Arabic (Modern Standard)
028	Physics	042	Chaldean
104	Sex Education	394	Chinese (Mandarin)
<b>367</b>	<b>Social Science</b>	050	English as Second Language
017	Anthropology	036	French
019	Behavioral Studies	037	German
018	Cultural Studies	396	Greek
015	Psychology	398	Hebrew
016	Sociology	400	Italian
<b>010</b>	<b>Social Studies</b>	041	Japanese
011	Economics	038	Latin
012	Geography	051	Other Bilingual
013	History	402	Other World Language
014	Political Science	404	Polish
<b>075</b>	<b>Special Education</b>	040	Russian
083	Autism Spectrum Disorder	039	Spanish
076	Cognitive Impairment	006	Writing
079	Emotional Impairment		
081	Hearing Impairment		
086	Inclusion		
082	Learning Disabilities		
084	Physical Education for Students with Disabilities		
078	Physical or Other Health Impairment		
077	Speech & Language Impairment		
085	State Section 31 - A (At-risk Students)		
080	Visual Impairment		
216	Sex Equity In The Classroom		
228	Staff Development Leadership		
237	Standards/Assessment/Review Team		
207	State Educ Policy, Admin, Rules, Procedure		
227	Student Dropout Prevention		
211	Student Motivation/Theories/Techniques		
213	Student Problem Solving Skills		
215	Student Self-Concept Development		
224	Substance Abuse Education		
<b>372</b>	<b>Technology and Design</b>		
<b>381</b>	<b>Technology, Vocational Arts, Communication</b>		
220	Testing and Measurement		

## SB-CEU CODE LISTING OF COUNTIES AND ISD'S

NUMBER	COUNTY OR ISD	NUMBER	COUNTY OR ISD
03	Allegan ISD	44	Lapeer ISD
04	Alpena-Montmorency-Alcona ESD	46	Lenawee ISD
08	Barry ISD	47	Livingston ESA
09	Bay-Arenac ISD	50	Macomb ISD
11	Berrien ISD	51	Manistee ISD
12	Branch ISD	52	Marquette-Alger ISD
13	Calhoun ISD	53	Mason-Lake ISD
14	Lewis-Cass ISD	54	Mecosta-Osceola ISD
15	Charlevoix-Emmet ISD	55	Menominee ISD
16	Cheboygan-Otsego-Presque Isle ISD	56	Midland County ISD
17	Eastern UP ISD	58	Monroe ISD
18	Clare-Gladwin ISD	59	Montcalm Area ISD
19	Clinton RESA	61	Muskegon ISD
21	Delta-Schoolcraft ISD	62	Newaygo ISD
22	Dickinson-Iron ISD	63	Oakland Schools
23	Eaton ISD	64	Oceana ISD
25	Genesee ISD	70	Ottawa Area ISD
27	Gogebic-Ontonagon ISD	72	C.O.O.R. ISD
28	Taverse Bay ISD	73	Saginaw ISD
29	Gratiot-Isabella RESD	74	St. Clair ISD
30	Hillsdale ISD	75	St. Joseph ISD
31	Copper Country ISD	76	Sanilac ISD
32	sHuron ISD	78	Shiawassee RESD
33	Ingham ISD	79	Tuscola ISD
34	Ionia ISD	80	Van Buren ISD
35	Iosco ISD	81	Washtenaw ISD
38	Jackson ISD	82	Wayne Co. RESA
39	Kalamazoo Valley ISD	83	Wexford-Missaukee ISD
41	Kent ISD		

*NOTE: Please refer to these county codes when completing SB-CEU application.*