

Program Application for NSH Approval of Contact Hours for Single Provider

Applications must be received in the NSH Office **21 days prior to the meeting** to allow time to process the paperwork and email materials to you before the meeting. Please complete this application and return it to the NSH headquarters office with a copy of your complete program including abstracts. Please review the guidelines for information on required documentation sent with your application. If you have any questions please contact the NSH Director, Meetings & Education, Aubrey Wanner, 443-535-4060 or via email, aubrey@nsh.org.

SECTION 1: Provider Information

1. Education Coordinator responsible for planning and program administration.
Name: Address:
Day time phone: E-mail address (All Meeting Paperwork Will Be Sent To This Email):
I agree to fulfill the duties of the Education Coordinator as listed in the Guidelines.
2. Name of the Organization requesting contact hour approval:
3. Type of Organization Requesting Provider Status:
NSH Constituent Society
Non Profit (e.g. hospitals, government organizations, other professional organizations)
For Profit (i.e. for profit CE Providers, businesses or other industry partners)
4. Meeting Paperwork:
Please provide us with speaker certificates Yes No Please provide us with session evaluations * Yes No
* Evaluations are required by NSH and must be returned to NSH. Hours will not be awarded to attendees if NSH does not receive completed evaluations. If you prefer to use your own format please check No.

Via Mail: 3545 Ellicott Mills Dr, Ellicott City, MD 21043 Via Fax: 443-535-4055 or Via Email: aubrey@nsh.org



Workshop Abstract:

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SECTION 2: Meeting Information Title of Meeting: Meeting Date(s): Meeting Start/End Time: Meeting Location (include facility name & address): **Meeting Sessions/Workshops** Complete the questions listed below for each session. Use as many pages as you need. Certificates and additional paperwork will reflect the names and credentials listed below. Workshop Title: Presenter (s): Workshop Length: Workshop Date: Workshop Objectives: 1. 2. 3.



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SECTION 3: Online Calendar Listing (see sample on Page 4)

NSH maintains an industry events calendar online (https://www.nsh.org/nsh-events/industry-events). If you would like your meeting added to the calendar, please complete the below information.

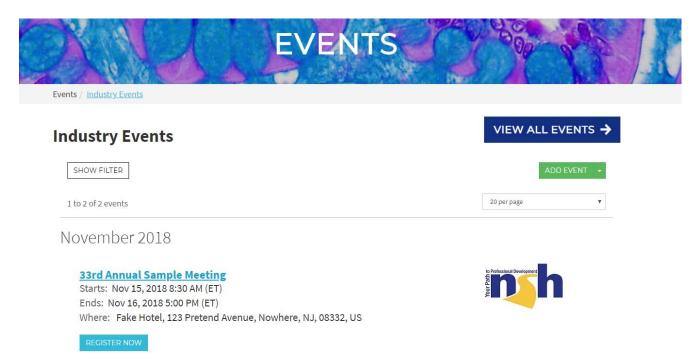
if you would like your meeting added to the eatendar, piease complete the below information.
Meeting Contact Information (Name, Phone, Email):
Link to website with more event details (optional but recommended):
Description of Event:(optional but recommended):
JPG of Event Image/Logo (could be Society's logo) (optional)

Via Fax: 443-535-4055 or Via Email: aubrey@nsh.org

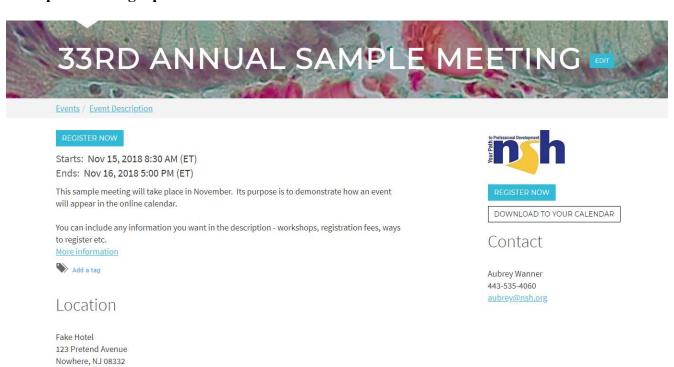


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Example of Listing On the Calendar



Example of Listing Opened On the Calendar



Via Mail: 3545 Ellicott Mills Dr, Ellicott City, MD 21043 Via Fax: 443-535-4055 or Via Email: aubrey@nsh.org