

# Renewal Form A: Strategy, Goals, and Objectives



Please fill out the following. If you need more space, attach additional sheets to this application.

**1. Describe the overall functions, strategy for training, and goals of the organization.**

**2. Briefly state the specific objectives of the continuing education program for substance use disorder and other helping professionals and how these objectives relate to the overall goals of the organization.**

**3. Describe the target audience (educational level and profession) for the organization's continuing education activities.**

**4. Check any professional certification or licensure bodies by which the organization is currently approved to offer continuing education activities.**

State Certification Body (Specify State(s): _____)	State Certification Body (Specify State(s): _____)
National Board for Certified Counselors	National Board for Certified Counselors
American Association for Marriage and Family Therapy	
National Association of Social Workers	
Other (Please List):	

**5. When did the organization begin offering continuing education activities to substance use disorder or other helping professionals?**

**6. What is the average number of continuing education activities that the organization offers per year?**

**7. How many continuing education activities are primarily for substance use disorder professionals?**

**8. What was the approximate number of participants in the past year?**