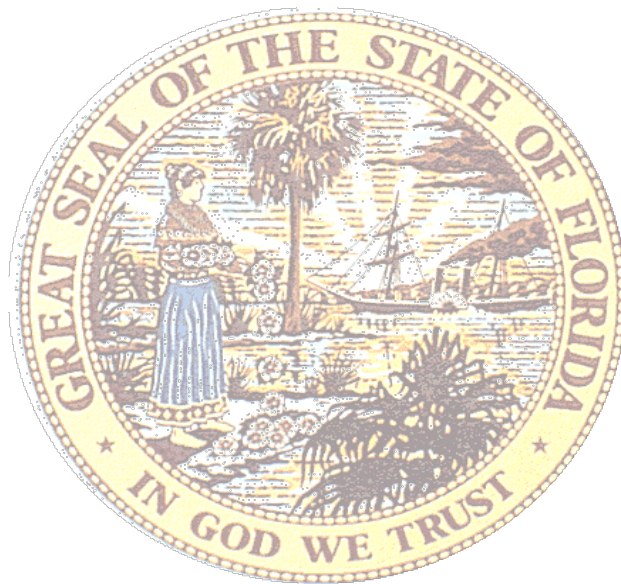


# **Florida Board of Professional Engineers**

**2639 North Monroe Street, Suite B-112**

**Tallahassee, Florida 32303**



## **Application For Approval of Professional Ethics Continuing Education Course**

## ETHICS COURSE PROVIDER APPLICATION

*If you have any questions or need assistance in completing the application, please contact  
Nancy Wilkins (850) 521-0500 ext. 113.*

### APPLICATION CHECKLIST

| Application Requirements   |
|--|
| <input type="checkbox"/> <b>ALL INFORMATION MUST BE TYPED. NOT TYPING THE INFORMATION PROVIDED IN THE APPLICATION WILL RESULT IN THE PAYMENT AND APPLICATION BEING RETURNED TO YOU TO BE FILLED OUT CORRECTLY. THIS WILL CAUSE A DELAY IN THE PROCESS AND MAY RESULT IN A MISSED APPLICATION DEADLINE.</b> |
| <input type="checkbox"/> <b>Complete CE Professional Ethics Approval Application</b>   |
| <input type="checkbox"/> <b>\$50.00 Application Fee</b>  |
| <input type="checkbox"/> <b>Submit copy of detailed course outline covering all required subjects and the Continuing Education Hours (CEHs) that will be given</b>   |
| <input type="checkbox"/> <b>Submit copy of instructor(s) résumé(s)</b>   |
| <input type="checkbox"/> <b>Submit sample of course certificate of completion</b>  |

When filing an application, be certain that the application is completely filled out, that all questions are answered truthfully and that all the information requested is provided. Please read all questions thoroughly.

#### **ATTESTATION STATEMENT:**

The provider's point-of-contact is required to sign the attestation statement located on the top of page 4. It is NOT to be signed by an instructor or administrative representative.

#### **GENERAL INFORMATION:**

If you are applying to qualify more than one course, you must fill out a separate Continuing Education Course Approval Application for each course. Each course provider approved by the Board to conduct courses in Professional Ethics must meet the requirements of Rules 61G15-22.0105 and 22.011, F.A.C., along with all other applicable laws and rules.

#### **COURSE TITLE:**

The course title you choose must adequately define the content of the course. You must complete each section of the application.

#### **COURSE INFORMATION:**

The course information filled out on the application must include the following: Course Description, Topics, Objectives,

Evaluation Methods, Detailed Course Outlines, Instructor Information, Instructor Qualifications and Certificates of Completion.

**COURSE DESCRIPTION:**

The course description must accurately reflect the content and material to be covered in the course, and must clearly identify how the course relates to professional ethics in the engineering profession.

**COURSE TOPICS:**

The course topics must relate to the course description. The course topic(s) must relate to the course description. The topic(s) should illustrate the specific areas that are going to be covered during the course, and must include at least one of the following from Rule 61G15-22.0105(5), F.A.C.: Codes of ethics or other guidelines for ethical decision making as applied to the practice of engineering; the importance of ethics as a broad professional concern; the engineer's obligations to society, clients, and the profession; ethical dilemmas encountered in engineering practice; or the application of professional ethics to decision making through examples.

**COURSE OBJECTIVES:**

The course objectives shall state what the licensee should be able to demonstrate when the course has been successfully completed. The objectives should clearly describe the intended performance to preclude misinterpretation.

**EVALUATION METHOD:**

Describe the method of evaluation that will be used to determine if the course attendees achieve the objectives of the course.

**DETAILED COURSE OUTLINE:**

The detailed course outline must indicate the course topic, all points to be covered regarding the topic and an associated timeline indicating the number of minutes to be spent on each topic. Reiteration of course topics does not constitute a detailed course outline. The course outline must be attached as an addendum to the application.

**INSTRUCTOR INFORMATION:**

List on the application the names of all instructors.

**INSTRUCTOR QUALIFICATIONS:**

Please attach a copy of the instructor(s) resumé(s)/curriculum vitae, listing any and all education and relevant work experience that set the instructor apart from the Professional Engineers whom the applicant proposes to instruct.

**CERTIFICATE OF COMPLETION:**

Submit a sample continuing education course certificate of completion that complies with Rule 61G15-22.012, Florida Administrative Code.

**NOTE:**

You must have applied and been approved as a Continuing Education Provider, under separate application, prior to submitting an application to offer continuing education courses in Professional Ethics.

Please send your completed application and documentation to:

**Florida Board of Professional Engineers**  
Attention: Nancy Wilkins  
2639 N. Monroe Street, Ste B-112  
Tallahassee, FL 32303  
[www.fbpe.org](http://www.fbpe.org)



## APPLICATION FOR APPROVAL OF PROFESSIONAL ETHICS CONTINUING EDUCATION COURSE



**Fee: \$50**  
(Made Payable to FBPE)

|   |   |        |                   |
|---|---|--------|-------------------|
| <b>COMPANY NAME:</b>  |   |        |                   |
| <b>MAILING ADDRESS:</b>   | Number and Street:  |        | Apt/Lot No.:      |
|   | City:   | State: | Zip Code: County: |
| <b>BUSINESS TELEPHONE NUMBER:</b>   | <b>EMAIL ADDRESS:</b><br><small>* All email addresses are public records pursuant to F.S. Chapter 119.011(12)</small> |        |                   |
| <b>POINT OF CONTACT:</b>  |   |        |                   |
| <b>*SOCIAL SECURITY NO. OR FEDERAL EMPLOYER ID NUMBER:</b>  |   |        |                   |
| <p><small>*Under the Federal Privacy Act, disclosure of Social Security Numbers is voluntary, unless specifically required by Federal Statute. In this instance, Social Security Numbers are mandatory pursuant to Title 42, United States Code, Section 883 and 854; and Sections 455.203(9), 409.2577 and 409.2598, Florida Statutes. Social Security Numbers are used to allow efficient screening of applicants and licensees by a Title IV-D child support agency to assure compliance with child support obligations. Social Security Numbers must also be recorded on all professional and occupational license applications and will be used for licensee identification pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Welfare Reform Act), 104 Pub. L. 193, Sec. 317.</small></p> |   |        |                   |
| <b>PROVIDER CATEGORY</b>  |   |        |                   |
| Please check the category that best describes your organization.  |   |        |                   |
| <input type="checkbox"/> A commercial educator. See Rule 61G15-22.002. F.A.C. Definitions. (An individual or business organization trained in teaching and offering education courses for a profit).  |   |        |                   |
| <input type="checkbox"/> A state or national professional association whose primary purpose is to promote the profession of engineering.  |   |        |                   |
| <input type="checkbox"/> A Professional Engineer with a Florida license to practice engineering who is not and has never been the subject of disciplinary action.   |   |        |                   |
| <input type="checkbox"/> A Professional Engineering Business holding a current Florida Certificate of Authorization.  |   |        |                   |
| <input type="checkbox"/> A governmental agency impacting the practice of engineering that is NOT a State or Federal Agency exempt under 61G15-22.011(9), F.A.C.   |   |        |                   |
| <input type="checkbox"/> Other  |   |        |                   |

| INSTRUCTOR INFORMATION               |  |                        |
|--------------------------------------|--|------------------------|
| <b>Last Name</b>                     | <b>First Name</b>  | <b>Middle</b>          |
|                                      |  |                        |
| <b>License Type:<br/>(check one)</b> | <input type="checkbox"/> Professional Engineer <input type="checkbox"/> Attorney | <b>License Number:</b> |
| <b>Last Name</b>                     | <b>First Name</b>  | <b>Middle</b>          |
|                                      |  |                        |
| <b>License Type:<br/>(check one)</b> | <input type="checkbox"/> Professional Engineer <input type="checkbox"/> Attorney | <b>License Number:</b> |
| <b>Last Name</b>                     | <b>First Name</b>  | <b>Middle</b>          |
|                                      |  |                        |
| <b>License Type:<br/>(check one)</b> | <input type="checkbox"/> Professional Engineer <input type="checkbox"/> Attorney | <b>License Number:</b> |

| COURSE INFORMATION   |
|--|
| Submit a copy of your course materials and indicate which of the required topics from Rule 61G15-22.0105(5), F.A.C. is being covered and where that coverage is located within the course content. |
| <b>List of resources used to develop the course content</b>  |
|  |
| Attach supplement if needed.   |

| COURSE OFFERING INFORMATION   |
|---|
| Is this a new course? <input type="checkbox"/> Yes <input type="checkbox"/> No                                |
| If this is not a new course, has the course changed? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Title of Course Workshop or Seminar:  |
| Number of Classroom Hours in Continuing Education Hours (CEHs):   |

**Method of Presentation**

Interactive Distance Learning - Courses offered through distance learning must comply with Rule 61G15-22.0105(7), F.A.C., as follows:

- Attach a copy of the document used by the students to interact and achieve answers to inquires within two business days.
- Attach a copy of the statement used by the students to evidence completion of each module/session of instruction
- Attach a copy of the document used to evidence ability to monitor student enrollment and participation upon completion of the course.
- Describe how the program promotes student involvement and measures learning and comprehension of content at regular intervals:
  
- Describe how you will assure qualified instructors will be available to answer questions and provide students with necessary support during the duration of the course, pursuant to the requirements in Rule 61G15-22.0105, F.A.C.:

## ATTESTATION

I have carefully read the questions in the foregoing application and have answered them completely, without reservations of any kind. I hereby agree to abide by the Florida Board of Professional Engineers Laws and Rules regarding Continuing Education provider status in Chapter 61G15-22.

**Applicant**

**Sign Here**  \_\_\_\_\_

**Date** \_\_\_\_\_

### **REMINDERS**

- \* **ATTACH A COPY OF THE INSTRUCTOR(S) RESUMÉ (CURRICULUM VITAE) THAT DEMONSTRATES KNOWLEDGE OF CHAPTER 471, F.S. AND CHAPTER 61G15, F.A.C.**
- \* **ATTACH A COPY OF THE CERTIFICATE OF COMPLETION.**
- \* **ATTACH A COPY OF THE DOCUMENT USED TO EVIDENCE ABILITY TO MONITOR STUDENT ENROLLMENT AND PARTICIPATION UPON COMPLETION OF THE COURSE.**
- \* **DESCRIBE HOW YOU WILL ASSURE QUALIFIED INSTRUCTORS WILL BE AVAILABLE TO ANSWER QUESTIONS AND PROVIDE STUDENTS WITH NECESSARY SUPPORT DURING THE DURATION OF THE COURSE, PURSUANT TO THE REQUIREMENTS IN RULE 61G15-22.0105.**
- \* **ATTACH A COPY OF THE STATEMENT USED BY THE STUDENTS TO EVIDENCE COMPLETION OF EACH MODULE/SESSION OF INSTRUCTION.**