

**Company or Sponsor** (this is not the name of the "Approved Provider")

ABC Company  
123 Right Way  
Anytown, USA 12345

**Certificate of Completion**

Attendee Name  
Ima Goodnurse

License Number  
R00000

has successfully completed  
**(NAME OF EDUCATIONAL ACTIVITY)**

for Continuing Education credit in nursing in the amount of \_(##\_)\_ Contact Hours

Date of Issuance: \_(##\_)\_

ABC Company has been approved as a provider of continuing education in nursing by the (name of accrediting organization/approved provider). This certificate must be retained by the licensee for a period of four (4) years from the date of course completion. Do not send it to the Board of Nursing.

Signature & Title

**Practice focused course of study**

**Must be less than two (2) years old at time of renewal or reinstatement**

A statement similar to this must appear on **every certificate** identifying the Accrediting Organization/Approved Provider which must be one found on the ASBN list.

## WILL THIS CONTINUING EDUCATION ACTIVITY COUNT FOR LICENSE RENEWAL?

We receive numerous phone calls and e-mails from nurses asking, "Will this continuing education activity count toward my requirement for license renewal?" If you are meeting the requirement by contact hour activities, we have designed an example of a certificate of completion that demonstrates compliance with the law.

### CONTACT HOUR OPTION

**Number of contact hours:** This information must be listed on the certificate. Fifteen practice-focused contact hours are required for on-time renewals. For a late renewal/reinstatement you must complete twenty (20) contact hours.

**Date:** The completion date must be listed on the certificate. The activity(s) must be completed and dated no more than two years prior to renewal/reinstatement.

**Title:** Include the full title of the educational activity.

**Course:** Must be practice-focused education specific to your job duties. For nurses not currently practicing, course of study may be selected from a variety of topics.

**Name of Accrediting Organization/Approved Provider**

**Statement:** This information should be the accrediting organization and not the company or sponsor of the activity. The name of the accrediting organization must be included on every certificate. There will be a statement similar to: "This activity has been approved for nursing continuing education by "(this is where the accrediting organization is found)." The most common accrediting

organization of nursing continuing education is the American Nurses Credentialing Center's Commission on Accreditation (ANCC), but there are many others that are acceptable. The accrediting organization must be one of the organizations found on the "ASBN Approved Accrediting Organizations/Approved Providers" list. The list can be found on the ASBN Web site, [www.arsbn.org](http://www.arsbn.org), through the Continuing Education link on the left side of the home page.

Rules governing continuing education require that you maintain copies of certificates of completed contact hour activities earned during your licensure period. If you are only keeping a "list" of courses completed via the Internet for your records or if your employer keeps a file – that is okay, but it is your responsibility to also maintain copies of certificates for each course of study for a minimum of four years. A number of nurses, at times, have found it impossible to retrieve copies of the certificates at a later date. If you are selected for a random audit, you will receive notification by mail asking that you demonstrate compliance by submitting copies of your documents for review by the ASBN. Submitting a list does not demonstrate compliance and will result in the issuance of a second request for appropriate documentation.

If in doubt whether a certificate will count toward your requirement for license renewal, compare it to the example and assess whether it contains all the necessary information. If it does, then there's your answer!