Continuing Education Provider Guide

NESTA ECB
31441 Santa Margarita Pkwy A-365
Rancho Santa Margarita, CA
92688 USA
Ph: 1-877-348-6692
Fx: 949-589-8216
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Overview of the NESTA ECB Continuing Education Provider Program

The National Exercise & Sports Trainers Association Executive Certification Board (NESTA ECB) Continuing Education Provider Program is designed to provide continuing educational opportunities for NESTA Certified Personal Fitness Trainers to enhance their professional knowledge and capabilities.

Organizations and individual professionals who participate in the NESTA ECB’s Continuing Education Provider Program are given an opportunity to introduce and promote their programs to more than 10,000 NESTA Certified Personal Fitness Trainers and more than 50,000 NESTA members.

Only the highest quality educational and professionals programs are accepted to be a NESTA ECB Continuing Education Provider.

NESTA ECB Certification

NESTA Certified Personal Fitness Trainers are exceptionally qualified individuals who provide individualized personal fitness training through safe, efficient and effective exercise programming for personal clientele and the public at large while striving to pave a new path of unparalleled professional excellence in fitness practice.

NESTA Continuing Education Requirements for Recertification

The NESTA ECB measures continuing education coursework and live training attendance according to Continuing Education Units (CEUs). Each CEU is based upon one hour of study or one contact hour of live training attendance.

NESTA Certified Personal Fitness Trainers are required to complete a minimum of 4.0 CEUs (40 contact hours) over a four year period.

The NESTA ECB will make all final determinations regarding the number of CEUs for each approved continuing education provider.

Why become a NESTA ECB Continuing Education Provider?

The NESTA ECB Continuing Education Provider Program is comprised of a prestigious group of individuals and organizations who are dedicated to encouraging professional excellence and personal growth through education. The following is merely a few of the significant benefits these continuing education providers receive:

- Listing as a NESTA ECB Approved Continuing Education Provider on the NESTA website which receives more web traffic and exposure than almost any other certifying agency for fitness professionals and directs that traffic to your program
• **Increased marketability** through approved usage of the NESTA ECB’s Continuing Education Provider Logo

• **Professional recognition** through your program’s acceptance by the highest professional standards of educational excellence set forth by the NESTA Executive Certification Board

**Term of Providership**

The NESTA ECB will accept applications for continuing education providers throughout the year.

Accepted Providership Applications will begin NESTA CEU Providership on the following dates (allowing up to 30 days for program or course review):

- January 1st when submitted between May 1st and November 30th
- June 1st when submitted between December 1st and April 30th

Approved providers of home study coursework are valid for one year beginning on January 1st or June 1st depending upon submission dates as described above.

Approved providers of live workshops or seminars are valid on a single event basis or for an entire year of unlimited listing.

In order to receive appropriate promotion time and marketability of your programs and/or coursework it is imperative that you submit your Continuing Education Provider Application at least 60 days prior to any live event or program registration deadline to allow 30 days for application processing by the NESTA ECB, and to allow at least 30 days for adequate promotion through exposure on the NESTA website and mention in the NESTA News email newsletter.

**Coursework and Presenter Qualification Requirements**

Individuals or organizations seeking to become continuing education providers must submit the following:

1) Continuing Education Provider Application Form included at the end of this guide

2) Complete lesson plan and course materials including exam or evaluation process for completion of coursework which must include the following content:

   - Handouts, presentation materials and/or textbook with scientific reference listings
   - Listing of educational objectives that show relevancy in content with at least one of the performance domains of the NESTA Certified PFT program
• Detailed lesson plan/guide for students to complete coursework or program including hourly breakdown for live training (a course/program flyer or brochure will suffice if sufficiently detailed)

• Description of assessment or evaluation process (Submission of actual exam/project may be requested and required) (Attendance at live training is sufficient)

3) Resume, curriculum vitae and/or brief bio of instructor(s) and/or writer(s) of coursework (Providers must either be NESTA PFT Certified or have a degree in a related area) (individuals who are non-degreed and non-NESTA certified applicants must provide an extensive curriculum vitae)

4) Providership Payment Fee (listed below)

Programs and events must fall into one of the following categories to qualify as a continuing education provider:

A) Live Workshops/Conferences/Conventions/Seminars
   Session Fee: $100
   Additional Session Fee: $50
   Unlimited Sessions: $175

   Live training sessions must include extensive hands-on activities and/or participation where an examination is not required. Live training sessions of the same content occurring three or more times per year (regardless of location) would fall under “Unlimited Sessions”.

B) Home Study/Correspondence Courses
   Course Fee: $100

Each program or event must cover content from one or more of the following performance areas for NESTA Certified Personal Fitness Trainers involving intermediate to advanced level content:

• Exercise Sciences
  Content must provide relevant information or study in the areas of exercise physiology, functional anatomy, biomechanics, flexibility and/or nutrition in order to better understand the physiological effects, benefits and risks of exercise and movement

• Assessments and Injury Prevention
  Content must be progressive and increase individual understanding of physical fitness assessment usage and implications and/or provide exercise programming or information for preventing injury and improving performance

• Business Applications
  Content must focus on improvement of interpersonal and business skills as they relate to both client and trainer success and/or how to run an efficient and effective
fitness practice as an employee or as an independent contractor or entrepreneur.

- **Program Design**
  Content must aid in the effective design of client programs that ensure consistent, effective and safe client progress

- **Exercise Application**
  Content must aid in the increased ability to apply appropriate exercises to meet the needs and wants of each individual client

**Participation Verification**

Each live presentation attendee or home study student must be given a form or certificate which verifies course completion or attendance (a sample will be provided in an acceptance packet once your organization is accepted as a continuing education provider). Each form must include attendee/student name, date of completion, event/program title, name of continuing education provider, NESTA ECB provider number and location (where applicable). Each participant/student will inform the NESTA ECB of attendance or course completion. Records of participant attendance or student coursework completion must be maintained by the continuing education provider for a minimum of five years.

**Application Process**

All NESTA ECB Continuing Education Provider Applicants must complete the application at the end of this guide and include the necessary application fees and information described in the Coursework and Presenter Qualifications Requirements section.

Allow 30 days for review of Continuing Education Provider Applications.

Applications which are received less than 30 days prior to an event or program date will not receive appropriate exposure and will be subject to a $25 late fee. Applications submitted within 30 days of event or program date cannot be guaranteed of acceptance prior to actual event or program.

**Application Review Process**

The NESTA ECB will review your application and verify that it complies with the standards and policies set forth in this document and is consistent with the continuing education expectations for NESTA Certified Personal Fitness Trainers. The final determination for actual CEU value as a continuing education provider will be made by the NESTA ECB.

**Award Notice**

Once you are accepted as a NESTA ECB Continuing Education Provider you will receive the following:
• Award Letter by mail stating the number of CEUs awarded for your course, a course provider number, and beginning and end dates for term as an approved provider

• Permission to use the NESTA ECB Continuing Education Provider Logo on marketing and promotional materials

• Listing on NESTA website and promotion through NESTA News email newsletter

Application Appeals

If your application is not accepted, you may appeal the decision to the NESTA ECB. The Continuing Education Provider Appeals Form must be completed and submitted within 90 days for consideration by the NESTA ECB. All course materials must be included with the appeal.

Appeals require a non-refundable $50 appeals fee. Information included in the appeal must provide new or more in-depth material for review in order to be considered by the NESTA ECB. The same program will not be considered again if not accepted by the NESTA ECB following the appeal.

Applicants submitting for appeal should allow 30 days for processing and consideration unless otherwise notified.

Provider Renewal

If coursework or programs remain unchanged when applying for renewal, you will only need to complete the application form and pay renewal fees.

Information on any course material changes or instructor changes must be included with the renewal application. Resubmission of course materials and/or presenter resumes may apply.
Continuing Education Provider Application

Please print or type all information

Today’s Date __________________
Date of Event/Program ________________

Check one of the following: □ New Provider □ Renewal
Provider Number (if renewing): ____________________

Contact Information

Company Name: __________________________________________________
Contact Name: ____________________________________________________
Mailing Address:___________________________________________________
City: ____________________ State: _____________ Zip code: _____________
Business Phone: ___________________ Home/Cell Phone: ________________
Company Website:_________________________________________________
Contact Email: ____________________________________________________

NESTA PFT Certified? □ Yes □ No
NESTA PFT Certification Number: ________________________________
College/Advanced Degree? □ Yes □ No
Degree(s): _____________________________________________________
University Attended: _____________________________________________

Course/Program Information

Course/Program Title: ______________________________________________
Type: □ Workshop □ Seminar □ Home Study □ Convention □ Conference
Date(s): _________________________________________________________
Contact Hours: __________________________________________________

Which of the following content areas does the course/program cover?
(Check all that apply)

□ Exercise Sciences □ Assessments/Injury Prevention □ Business
□ Program Design □ Exercise Application
Course/Program Description
(include a brief description of the course/program goals, objectives and overview with specific mention of how your course/program meets NESTA ECB standards for continuing education and exceeds entry level practice for Certified Personal Fitness Trainers)

______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________
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______________________________________________________________________________________
______________________________________________________________________________________

Course/Program Fees:
Live Course Fee: $100 x ________ = __________
Additional Courses Fee: $25 x ________ = __________
Unlimited Sessions Fee: $175 x ________ = __________
Home Study Course Fee: $100 x ________ = __________
Late Fee: $25 x ________ = __________

Total Fees: $_________

Payment Information
□ VISA □ Mastercard □ American Express □ Money Order □ Company Check

Credit Card Number: __________________________ Expiration: ____________
CVV Code: __________  Name on card: _______________________________
Signature: ________________________________________________________

Application Checklist: (Did you include everything before submission?)
• Complete application
• Payment Information with payment included
• Resumes and/or curriculum vitae of presenters/writers
• Course/program flyer or brochure
• Lesson plan/required course materials

Mail complete application and materials to:
NESTA Executive Certification Board
31441 Santa Margarita Pkwy A-365
Rancho Santa Margarita, CA 92688-2123 USA

Signature Confirmation
I hereby attest that the above application information and all materials included in submission are complete and accurate to the best of my knowledge. I understand the rules and guidelines for acceptance as a NESTA ECB Continuing Education Provider and agree to its terms.

______________________________  ________________
Signature of Primary Contact Person    Date
Provider Application Appeal Form

Today’s Date ________________________
Course/Program Title _______________________________________________
Course/Program Type: ______________________________________________

Contact Information
Company Name ___________________________________________________
Contact Name ____________________________________________________
Mailing Address ___________________________________________________
City _______________________ State____________ Zip Code _____________
Business Phone ____________________ Home/Cell Phone ________________
Company Website _________________________________________________
Email ___________________________________________________________
Fax ___________________________

Reason for appeal (provide evidence/justification in a few sentences)
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

Appeals Checklist
Did you include each of the following items?
• Completed Provider Application Appeal Form
• Course materials (including new supporting information/documentation)
• $50 appeals fee

Mail to: NESTA ECB Appeals
31441 Santa Margarita Pkwy A-365
Rancho Santa Margarita, CA 92688-2123 USA

Payment info: □ Credit Card □ Money Order □ Company Check
Credit Card Number _____________________ Expiration Date ____________
CVV Code ______________

Signature ________________________________

Call 1-877-348-6692 ext 210 if you have questions or concerns about filling out the appeals application