



The ISSA CEU Preferred Provider Program

The preferred provider program for continued education is a service designed to allow outside continuing education providers the opportunity to easily offer their education programs to ISSA members.

Continuing Education Requirement

Currently, ISSA requires a minimum of 20 Continuing Education Units (CEUs) to be earned within the two years of a student's certification. All 20 units must be taken through the ISSA CEU Library, an ISSA Continuing Education Provider or other ISSA-approved continuing education activities. Certifications will not be renewed unless the CEU requirement has been met.

What does this mean for YOU?

ISSA students are interested in fulfilling their CEU requirements through various courses, workshops, conferences, and other approved continuing education opportunities. This program allows you to highlight your opportunity to our ISSA members!

Once Approved

Your continuing education opportunity will be listed on the ISSA Preferred CEU/CEC Provider website where students can easily find your offerings.

The Application Process

Application: As the sponsor of a program (event, course, etc.), you must submit an application for CEU approval for that program.

Review: The ISSA CEU Approval Committee reviews your application and educational program for compliance with its continuing education guidelines. Only complete applications will be reviewed.

Award Letter: If your program is approved, you will receive an award letter specifying the number of CEUs that can be earned by ISSA members who participate in your activity. Approvals are valid through 12/31 of the year of application.

Qualifying programs

- Health and fitness related courses (in-person, web-based, video)
- Health and fitness related seminars/conventions
- Health and fitness related certifications/specializations not offered by ISSA



Activities that do not qualify

- Programs that do not relate to personal training, health, health care, fitness, fitness training, sports science, sports medicine, nutrition, business
- Certifications/specializations currently offered by ISSA

If you have questions about whether your activity qualifies for CEU approval, please contact the ISSA CEU Approval Committee at ISSAPreferredProvider@issaonline.com.

How to Apply

Allow 30 days for processing. Please be aware that incomplete applications will be returned to the contact person for completion and the 30-day processing time will not begin until a complete application is received.

Please Provide:

- The completed and signed application
- Presenter/Instructor résumé: submit a résumé for each speaker/author involved in your program
- Program/course outline or agenda
- If you are applying for a multiple event (an activity which repeats at different times and/or locations during the year), attach a listing of all dates and locations where the activity will take place
- A certificate of completion
- Send application to:
International Sport Sciences Association
c/o CEU Approval Committee
11201 N. Tatum Blvd., Suite 300
PMB 28058
Phoenix, AZ 85028-6039
or email: ISSAPreferredProvider@issaonline.com.

Application Fees

The non-refundable application fee (see below) starts with the approval date and ends on 12/31/2024. If your program is not accepted, you will receive an email stating the basis of the decision. If you decide to alter the program to meet the requirements, you may reapply within a year of your initial application for \$75*.

*Sales tax charged as applicable



If you have questions about the application fee please contact the ISSA CEU Approval Committee at ISSAPreferredProvider@issaonline.com.

ISSA CEU Preferred Provider Application

Provider:

Has this provider previously been approved by ISSA? Yes: No:

If yes, ISSA Preferred Provider number: _____

Contact Person:

Mailing Address:

City:

State:

Zip:

Email Address:

Telephone:

Website:

Title of Program (should match award certificate):

Short program description:

Program website link (this will be listed on our website):

Topic area: Select area most applicable to your offering:

- | | |
|---------------------|--------------------------|
| Anatomy | Nutrition Education |
| Biomechanics | Nutrition/Weight Control |
| Business Management | Special Populations |
| Exercise Assessment | Sports Psychology |
| Exercise Psychology | Strength Training |
| Kinesiology | |



Type of Program: *(check all that apply)*

Seminar

Textbook

Convention

In-person or Online Course

Workshop

Other (Please enter)

For Seminar, Convention or Workshop—Please list location(s) and date(s):

Location(s):

Date(s):

For In-person or Online Course- (If course is self-study, please indicate):

Dates:

Proposed Continued Education Units (Attach schedule/course outline to verify contact hours)

(NOTE: 1 contact hour = 1 CEU=0.1 CEC)

Presenter(s), Author(s), Instructor(s):

-Attach resumes for all

Program Description:

Program Learning Objectives:

Certificate of Completion: (Please attach a sample copy of the documentation of completion that students/attendees will receive upon successful completion of your program.)



ISSA Preferred Provider Program Application Fees

	Quantity	Cost Per	Total
One (1) Program Application Fee		x \$250	
Additional Program		x \$100	
Total			\$
<p>The fee breakdown below is per multi-session weekend program (workshop, conference, or seminar). If you offer more than one of the same weekend program per year, the fee is \$200 per repeat of the program.</p>			
Multi-Session Program 1-50 Sessions		x \$400	
Multi-Session Program 51-100 Sessions		x \$800	
Multi-Session Program 100+		x \$1,200	
Additional Multi-Session Programs		x \$200	
Total			\$

Payment Options:

Payment by Credit Card or ACH is available. Once your application is processed and approved, you will receive an invoice via Stripe payment where you can pay via credit card or ACH.

- I certify that the information provided in this application is true and correct and I am allowed to provide these details on behalf of the organization.
- I agree to the terms and conditions.

Signature:

Printed Name:

Date:

Title: