

## **Continuing Education Petition Application**

## **NETA Certificant Information**

Name:	NETA Customer ID:					
Address:						
City:	State: Zip:					
Email:	Phone:					
NETA Certification:	Expiration Date:					
Course Info	formation plication for each course)					
Course Title:	Date of Completion:					
Course Provider:	# of Contact Hours:					
College or University Course? Yes ☐ No ☐	If yes, # of Credits & Grade Earned:/					
Instructor:	# of NETA CECs Requested:					
Instructor's Qualifications (e.g., degree, certification						
List the primary learning objectives for this course.						

## **Please Note:**

- Please submit the CE Petition Application at least 30 days prior to the designated renewal date for your NETA certification. **DO NOT SUBMIT A PETITION APPLICATION WITH A RENEWAL APPLICATION.**
- Eligible courses must be completed within current two-year certification period (i.e., after certification date of issue and before designated expiration date).
- Course learning objectives and subject matter must be relevant to the NETA certification held, as reflected by the practice analysis/role delineation for a specific certification.\*
- NETA automatically accepts CECs/CEUs pre-approved by ACE, AFAA, and/or NASM. Courses pre-approved for CECs/CEUs by one or more of these organizations *do not* require a Petition Application.
- CPR, AED, and First Aid courses are not eligible for NETA continuing education credits (CECs).
- Incomplete applications will not be processed and will be returned to the applicant.
- The \$25 application fee (per course) is non-refundable and does not guarantee that NETA CECs will be awarded.

## **Please Enclose:**

- Copy of detailed course outline or syllabus.
- Certificate of Completion or copy of unofficial college/university transcript.
- Petition Application fee of \$25.00 (for each course). NETA accepts payment via check, money order, or credit card. Please make checks payable to NETA.

Method o	of Paymen	t:					
Total Amo	ount Enclo	sed: \$					
☐ Check	< #						
☐ Mone	y Order						
☐ Credit	t Card	Credit Card Type:	Visa / N	MasterCard /	Discover / Am	erican Express	
Card Num	nber:				Exp. Date:	CVC#	_
Cardholde	er Signatuı	·e:					
that NETA and with	A continuir this applic	g education credits	(CECs) will curate. I un	l be awarded. nderstand tha	I attest that the this application	does not guarantee information provided in may be rejected if any	
Applicant	Signature	:				Date:	_
Mail To:							
	dustrial Par olis, MN 55	rk Boulevard, Suite 2 3441	220				
or							

\* NETA continuing education credits (CECs) will only be awarded for continuing education activities that cover subject matter within the scope of practice for an exercise professional (e.g., group exercise instructor, personal trainer) and are relevant to the practice analysis/role delineation for NETA's Group Exercise Instructor or Personal Trainer certification exam. Examples of topics that will *not* be awarded NETA CECs include, but are not limited to: kinesio taping, diagnosing, massage therapy, counseling, hypnosis, chiropractic or physical therapy techniques (e.g., ultrasound, manual tissue/joint manipulation, acupuncture), and medically oriented dietary interventions.

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For more information regarding NETA certification renewal policies and procedures please refer to NETA's website at <a href="www.netafit.org">www.netafit.org</a> or the NETA Certification Board's <a href="mailto:Recertification">Recertification Handbook</a>.

Fax To: 1-763-545-2524