



ACTIVITIES DIRECTOR COURSE APPLICATION

General Information

Pursuant to the rules for Nursing and Specialized Facilities, Chapter 675, at 310:675-13-8(b)(3), the Department (Oklahoma State Department of Health) has authority to approve activities director courses. An OSDH application review will determine if state requirements for a director course are met prior to notification of approval or denial. Notice of the Department's decision to approve or deny will be forwarded to the applicant within thirty (30) calendar days from receipt of the application.

If the Department finds the application has not addressed all requirements, a written notice shall be provided detailing the requirements not met and providing opportunity for amendment to the application. After review, the Department will notify the course contact person of approval, disapproval, action, or changes of status regarding the course. [OAC 310:675-13-8(c)(2)]

Training shall be provided through a program sponsored or approved by a nationally affiliated association of providers subject to Oklahoma Nursing and Specialized Facilities Rule, regionally accredited institution of higher learning, Oklahoma career technology center, or nationally recognized professional accrediting body for activity professionals [OAC 310:675-13-8(c)(3)]. Instructors shall have a degree or substantial recent experience in the subject matter being taught, or other educational, teaching, or professional qualifications determined by the course provider. [OAC 310:675-13-8(c)(7)]

Course approval shall be for a period of three (3) years from the date of approval issuance. In the interest of updated curriculum, reflecting the latest best practice, a new application, and curriculum review are required triennially. Currently approved training programs shall apply under this section within twelve (12) months from June 25, 2009, the effective date of this rule. [OAC 310:675-13-8(c)(11)]

Course Eligibility

Any person or entity seeking to conduct an approved activities director course shall make application to the Department as provided in OAC 310:675-13-8, Activities personnel.

Instructions

1. Carefully read all instructions and complete all sections of the application, as indicated.
2. Additional pages may be inserted if the space allotted is not sufficient. Attach required documents. When inserting a page, identify the specific page of the application form and the section that it completes. Duplicate and retain a file copy of the completed original application including all pages added by the applicant.
3. Submit application fee of one hundred dollars (\$100.00) with each completed application for course approval. Make check or money order payable to the Oklahoma State Department of Health or OSDH. This fee is non-refundable.

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Section I. Program Information

Date of Application ____/____/____

Name of Applicant _____
Individual or entity sponsoring the course

Division/Department (if applicable) _____

Address of Applicant: _____
Address City State Zip

Contact Person _____
Last First Initial

Address of Contact Person: _____
Address City State Zip

(____) -____, _____ (____) -____ _____
Telephone Number Ext Fax Number E-mail Address (optional)

Identify Program Affiliation. *Training shall be provided through a program sponsored or approved by a nationally affiliated association of providers subject to this chapter, regionally accredited institution of higher learning, Oklahoma career technology center, or nationally recognized professional accrediting body for activity professionals.* [OAC 310:675-13-8(c)(3)]

Identify Requirements for Course Instructor. *Instructors shall have a degree or substantial recent experience in the subject matter being taught, or other educational, teaching, or professional qualifications determined by the course provider.* [OAC 310:675-13-8(c)(7)]

Identify Requirements for Records Retention. *The course sponsor shall maintain course records for at least five (5) years. The Department may order an examination of the records for good cause shown.* [310:675-13-8(c)(13)]

Section II. Curriculum

1. Submit copies of the course outline and identify as '**Attachment 1**'. [310:675-13-8(c)(1)(C)]

Course outlines include:

- a list of the summarized topics covered in the course,
- the time allotted for each topic, and
- upon request, a copy of any course materials.

2. *The approved course will consist of not less than twenty-four (24) hours of instruction. A course taught in combination with social services director training may share eight (8) hours of programming.* [310:675-13-8(c)(9)]

Are you offering a course taught in combination with social services director training? Yes No

If yes, initial to confirm course shares 8 hours or less of required programming. Initial Here _____

Section III. Course Standards

Submit information of how the course meets the course content standard provided in OAC 310:675-13-8(c)(1)(D) and OAC 310:675-13-8(c)(8). Identify as '**Attachment 2**'.

Will course content be delivered through the Internet or other self-directed media? Yes No

If yes, not less than twelve (12) course content hours must be devoted to role play or actual experience in leading group and one-on-one activities programming. Attach information of how the course meets the course content standard and identify as '**Attachment 3**'. [OAC 310:675-13-8(c)(8)(J)]

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Section IV. Completion Certificate

Submit a sample certificate of completion and identify as ‘Attachment 4’. [310:675-13-8(c)(1)(E)]

Participants shall be issued a certificate of attendance indicating the name of the sponsoring entity; participant name; course name; course dates; printed name and signature of official representing the sponsoring entity. [340:675-13-8(c)(10)]

Section V. Attendance

Submit procedures of how attendance will be monitored. If attachment, identify as ‘Attachment 5’. [310:675-13-8(c)(1)(F)]

Section VI. Evaluation

Submit procedures for evaluating successful course completion. If attachment, identify as ‘Attachment 6’. [310:675-13-8(c)(1)(G)]

I declare the information contained in this application is accurate and truthful. I understand the State standards and requirements for curriculum and instruction of an Activities Director Course as specified in OAC 310:675-13-8(c) and I, as Applicant/Course Contact Person, assure the OSDH I shall adhere to them, and that the sponsoring entity will not advertise this course as endorsed, recommended, or accredited by the Department. Nor shall any person or entity sponsoring or conducting this course advertise or advise program participants that completion of the program grants a certification, but I may indicate the Department has approved the course to qualify for employment as an Activities Director.

I further understand the Department may, upon notice and right to hearing, decline to renew, or revoke the approval of, any previously approved course upon a showing or demonstration that the course, instructor or entity has substantially failed to adequately prepare its attendees or participants as activity directors and/or for course violation of, or non-compliance with, any provisions of state standards.

Signature of the Applicant or Course Contact Person

_____/_____/_____
Date

Submit a check or money order for the fee amount of \$100.00, made payable to the Oklahoma State Department of Health or OSDH.

Submit the completed application and fee to:

**Oklahoma State Department of Health
Health Resources Development Service
P.O. Box 268816
Oklahoma City, OK 73126-8816**