

**North Carolina Association of Educational Office Professionals, Inc.  
Professional Standards Program  
Application for Approval of In-Service Training Program**

Only Typewritten Forms Will Be Processed

This request is submitted for approval for the course described below under the education requirements of the Professional Standards Program. If this course is approved, a certificate or statement of successful completion will be submitted to the Registrar of the Professional Standards Program

|                              |                       |  |
|------------------------------|-----------------------|--|
| <b>County Where Employed</b> | <b>District No.</b>   |  |
| <b>Employer</b>              | <b>Year of Course</b> |  |
| <b>Name of Applicant</b>     | <b>Work Phone</b>     |  |
| <b>E-mail Address</b>        | <b>Work Fax</b>       |  |

**Mail:** 2 copies to Donna Tapp, CEOE, PSP Registrar, 16042 Old Wire Road,  
Laurinburg, NC 28352 (Enclose a Self-Addressed stamped envelope to  
receive your copy)

**Fax:** 1 copy to 910 OR **E-mail:** 1 copy to [psp@ncaeop.org](mailto:psp@ncaeop.org)

|                                      |                           |                                  |
|--------------------------------------|---------------------------|----------------------------------|
| <b>Course Name (Include Number):</b> |                           |                                  |
| <b>Institution Offering Course:</b>  |                           |                                  |
| <b>Beginning Date:</b>               |                           | <b>Ending Date:</b>              |
| <b>Number of Hours per Session:</b>  | <b>Number of Sessions</b> | <b>Total Clock Contact Hours</b> |

Brief Description of course content (for continuing education courses, include a brochure or catalogue course description.)

Signature of Applicant Submitting Request: \_\_\_\_\_

**TO BE COMPLETED BY PSP REGISTRAR**

The above in-service program is            approved OR            not approved    to satisfy in-service requirement under  
Option B.

Signed \_\_\_\_\_  
Donna Tapp, CEOE, PSP Registrar

Date: \_\_\_\_\_