

**State of Nevada**  
**Board of Occupational Therapy**

P.O. Box 34779  
Reno, Nevada 89533-4779  
Phone (775) 746-4101 / Fax (775) 746-4105 / Toll Free (800) 431-2659  
E-mail: [board@nvot.org](mailto:board@nvot.org) / website: [www.nvot.org](http://www.nvot.org)

## Continuing Competency Activities and Education

*Credit for the same continuing education activity will be awarded only once during two successive renewal periods.*

- **Continuing Education** - workshop, seminar, conference, or in-service educational program; electronic or Web-based courses, self-paced clinical courses or other formalized self-study courses. Attach Copy Of Certificate Of Attendance Or Documentation Of Completion
- **Academic Coursework** - on-site or distance learning academic courses from a university, college, or vocational technical adult education course related to the practice of occupational therapy; Attach grade report or transcript, and description of the course from the school catalogue or course syllabus.
- **Mentorship Agreement** - Formalized mentorship as a mentor or mentee. Attach signed contract and provide dates, hours spent in mentoring activity, focus and outcomes of mentorship activities.
- **Fieldwork Supervision** - primary clinical fieldwork educator for Level I or Level II, OT or OTA, fieldwork students. Attach verification by the school with the name of student, school, and dates of fieldwork. Maximum of 2 credit hours for Level I fieldwork and 1 credit hour for each week of Level II fieldwork supervision.
- **Professional Writing** - Publication of a peer-reviewed book, chapter, or article. Attach full reference for publication including title, author, editor, and date of publication; or copy of acceptance letter, if not yet published. Maximum 10 credit hours for publication of a book, 3 hours for one or more chapters, and 1 hour for publication of an article.
- **Presentation and Instruction** - academic course or workshop, seminar, in-service, electronic or Web-based course. Attach copy of official program, schedule, or syllabus showing title, date, hours of presentation, learning objectives and audience.
- **Professional Meetings and Activities** - board or committee work with agencies or organizations to promote and enhance the practice of occupational therapy. Attach verification of participation signed by an officer or representative of the organization or committee. Maximum of 2 credit hours.
- **Board Certification or Specialty Certification** – certification from recognized board or certifying body. Attach certificate of completion. Maximum of 5 credit hours.
- **Other** - The board will consider approval of credit for any continuing competency activity that is not specified above, if the request is submitted to the board before the due date on which a license must be renewed.

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**COMPLETE A SEPARATE FORM FOR EACH CONTINUING COMPETENCY ACTIVITY**

**Continuing Competency Activities and Education**

Name: \_\_\_\_\_ License #: \_\_\_\_\_

**Check Applicable Continuing Competency Activity:**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Continuing Education         | <input type="checkbox"/> Academic Coursework   | <input type="checkbox"/> Fieldwork Supervision            |
| <input type="checkbox"/> Presentation and Instruction | <input type="checkbox"/> Professional Meetings | <input type="checkbox"/> Board or Specialty Certification |
| <input type="checkbox"/> Professional Writing         | <input type="checkbox"/> Mentorship Agreement  | <input type="checkbox"/> Other                            |

**Attach All Required Documentation**

\_\_\_\_\_  
**Title of Program / Activity**

\_\_\_\_\_  
**Program Sponsor**

Date(s) of Attendance \_\_\_\_\_ Contact Hours \_\_\_\_\_

For Continuing Education Activities as applicable – Provide Biographical Information of Instructor:

\_\_\_\_\_  
\_\_\_\_\_

All Activities: Describe how the activity broadens your knowledge of occupational therapy roles, or relates to your current or anticipated roles and responsibilities.

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