



Education Approval

FOR DISTANCE LEARNING COURSES

1. Name of Course _____
(Certificate of completion must reflect exact wording above)
2. Names and Credentials of Author(s) (attach a brief bio) _____

3. Summary of Distance Learning Course _____

4. Number of Hours _____ How were hours determined? _____

5. Type and Sample of Testing Mechanism _____
6. Company Name _____
Address _____
City _____ State _____ Zip Code _____
Phone Number _____ Contact Person _____
7. PCB Education Provider # _____ (if applicable)
8. Please submit the distance learning application fee of \$50 per course for a 12-month period. You must also submit the entire distance learning course with this application for review.

Allow 60 days for review. PCB reserves the right to approve or deny education.

Send bio of author(s), application fee (payable to PCB), entire distance learning course, and this application to:

Pennsylvania Certification Board, 298 S. Progress Ave., Harrisburg, PA 17109.4626
717.540.4455 **Fax 717.540.4458**