# ADEA Education Endorsement Application Form



Section 1: Organisation Details
Organisation Name:
Organisation Type (e.g. Pharmaceutical company, hospital, not-for-profit):
Contact Person:
Position Title:
Phone: Email:
Postal Address:
Website:
Short description of the organisation and services offered:
Code of practice or education delivery guidelines? $\square$ Yes $\square$ No If yes, please attach a copy.
Section 2: Endorsement Type
Is this a:
☐ New Endorsement
□ Re-endorsement (Year previously endorsed:)
Section 3: General Details of the Activity
Title of Activity:
Type of Activity (tick one): $\square$ Masterclass $\square$ Workshop $\square$ Symposium $\square$ Conference $\square$ Online Course $\square$ Webinar $\square$ Podcast $\square$ Other:
Duration (in hours or days):
Proposed Start Date:
One-off Event? ☐ Yes ☐ No
Will any part be recorded for future use? $\square$ Yes $\square$ No
O How will recordings be hosted and shared?

 $\circ$  Has presenter consent been obtained?  $\square$  Yes  $\square$  No

# Section 4: Target Audience

Primary Audience (tick all that apply):
☐ Diabetes Educators
☐ Registered Nurses
□ Midwives
☐ Dietitians
☐ Pharmacists
$\square$ Exercise Physiologists
☐ Podiatrists
□ GPs
☐ Other:
Secondary Audience (tick all that apply):
□ Diabetes Educators
☐ Registered Nurses
□ Midwives
☐ Dietitians
☐ Pharmacists
☐ Exercise Physiologists
☐ Podiatrists
□ GPs
☐ Other:
Focus Area:
☐ Clinical management
□ Research
$\square$ Education and counselling skills
☐ Service or staff management
$\square$ Professional knowledge
□ Other·

# **Section 5: Content and Learning Objectives**

• (	Overall aim of the activity:
• L	_earning objectives:
- • F -	Relevance to a Diabetes Educator:
• (	CDE involvement in content development?   Yes   No
certificat	n full activity plan and educational materials (include copies of the content, feedback surveys, tes and other materials related to the educational content)  Ile references, bibliographies, and clinical guidelines
Section	n 6: Format and Delivery
Mode of  ☐ Online ☐ Face-t ☐ Blende	to-face
(If no, pro Will lear	d by ADEA?  Yes  No rovide viewing access details):  ners interact with a moderator?  Yes  No tion/management approach:
If face-to	
	bility/Disability Support Measures:
Eroquen	cy (if not one-off):

reaching Methodology:			

# Section 7: Presenters, Assessment & Evaluation

Facilitators/Moderators:
☐ Attach CVs or bios of presenters.
Assessment:
□ Yes □ No
Type (tick all that apply):
$\   \Box  Quiz  \Box  Multiple  quizzes  \Box  Case  study  \Box  Essay  \Box  Presentation  \Box  Ongoing  performance$
□ Other:
□ Sample of assessment attached □ Rationale for no assessment (if applicable):
Pre-Activity Reading Required? ☐ Yes ☐ No Estimated Reading Time:
Evaluation:
New activity? ☐ Yes ☐ No
Will it be reviewed regularly? $\square$ Yes $\square$ No
(Attach evaluation plan or explain below)
Previously endorsed?   Yes   No
If yes, attach prior evaluation or explain revisions:
Certificate Provided? ☐ Yes ☐ No  If no, state evidence of participation:

## **Section 8: Endorsement Inclusions and Costings**

A. Endorsement for Ongoing Educational Activities (e.g. Courses, Webinars, Podcasts)

These include on-demand, multi-module, or regularly offered activities.

Tick desired components. All fees exclude GST.

Inclusion	Description	Fee (ex. GST)
☐ Basic Endorsement	Content review, CPD allocation, ADEA logo use	\$1,500/year
☐ LMS Listing	Listing on ADEA LMS + link	\$1,000/year
$\square$ Promotion Package	Newsletter or social media post	From \$500
$\square$ Administrative Review	One-off content processing fee	\$500–\$1,000
☐ Multi-course Discount	Bulk discount	Request quote

**B.** Endorsement for Conferences, Masterclasses, and Workshops (One-off or Short-Format Events)

These are single events typically held over 1–3 days.

Inclusion	Description	Fee (ex. GST)
□ Event Endorsement	Content review, CPD allocation, and ADEA logo use.	\$1,000 Flat Rate
□ ADEA Event Calendar Listing	Listing of the event on the ADEA public event calendar	\$300/per event
□ Promotion Package	One-time e-newsletter or social media post promoting the event	From \$300

### Notes:

- Promotion and event calendar listings are *optional* and not included in the base endorsement fee.
- All endorsements are for a **maximum of 1 year**
- ADEA endorsement allows use of the ADEA Endorsed Logo for the approved period.
- Re-endorsement requests are reviewed for any material content or format changes.

## **Section 9: Commercial Influence & Conflict of Interest**

Endorsement Program.

•	Is this activity sponsored or supported by a third party? $\square$ Yes $\square$ No
	If yes, name of sponsor and nature of support:
•	Does the content reference specific products or services? ☐ Yes ☐ No
	If yes, explain how neutrality and balance are maintained:
•	Are there any potential conflicts of interest among presenters or content developers?   Yes   No  If yes, provide a summary of disclosures and how these were managed:
□ I/we approp	declare that any potential commercial or personal interests have been disclosed and addressed riately.
Section	on 10: Accreditation and CPD Relevance
•	Is the activity aligned with national competencies or professional frameworks (e.g. NMBA, HWA, AQF)? $\square$ Yes $\square$ No
	If yes, please list:
•	Describe how the activity supports reflective practice or clinical decision-making:
Section	on 11: Declaration
I/we	
	(name of person/organisation) declare the ation submitted as part of this application, or forming part of this application, to be correct and I/we
	apply for endorsement of the educational activity by the Australian Diabetes Educators Association
If the p	rogram is endorsed by ADEA, I/we agree to the terms and conditions laid down by the ADEA

I/we understand that endorsement becomes invalid if the content or organisational aspects require significant change, or are changed by more than 10 per cent.

I/we understand that the program will require further review and charges if these changes occur and that the endorsement is valid for 1 year following the endorsement date unless approved for endorsement for a two-year period.

I/we understand that a score of 63/90 or higher will be required for the activity to be endorsed by ADEA. If this score is not achieved I/we will work with the ADEA National Office to address all comments from assessors.

I/we hereby agree to abide by all ADEA policy surrounding educational programs, use of the ADEA logo, and any other applicable policies.

I/we acknowledge that the ADEA endorsement and associated logo may not be used once the endorsement period has expired or if endorsement is withdrawn. All references to ADEA endorsement, including logo use, must be removed from all materials, platforms, and promotions if endorsement ceases.

Signature:
Date:
$\Box$ I agree to ADEA's endorsement terms and conditions

#### Checklist

□ Code of Practice (if applicable)
□ Full Activity Plan & Content
□ Invitation/Agenda (if applicable)
□ CVs/Bios of Presenters
□ Sample Assessments
□ Sample Certificate
□ Evaluation Plan or Report (if applicable)
$\square$ Access to LMS or Link to Course (if not ADEA-hosted)
□ Conflict of Interest Disclosures (if applicable)

#### **Submit Completed Applications to:**

Email: education@adea.com.au

Post: ADEA Education Department, PO Box 163, Woden ACT 2606

Phone: (02) 6287 4822

Website: www.adea.com.au