

CONTINUING PROFESSIONAL DEVELOPMENT (CPD) ACCREDITATION Application for Re-accreditation — Program (**Equality, Diversity and Inclusion Professionalism Content Only**)

Application Instructions

Review the [Accreditation Criteria for Professionalism Hours](#) webpage for information about the topics that qualify for Equality, Diversity and Inclusion professionalism accreditation.

Use this Application form if you are an educational provider or licensee whose program was accredited by the Law Society for Professionalism Hours **prior to December 31, 2017** and you wish to request that the program be re-accredited to take into account the part or parts of the program that focus on equality, diversity and inclusion topics.

Submit a copy of this Application form by email to cpdacc@lso.ca. The original Application for Accreditation – Program (Professionalism Content) and all supporting documentation must be included with your Application form.

Complete a separate Application for each program re-accreditation request.

Re-Accreditation Process

The Law Society deals with a high volume of Applications and the standard processing time for re-accreditation applications is approximately **15 business days of receipt** of the Application. Incomplete Applications may require additional processing time.

Applications for re-accreditation of Professionalism Hours may be submitted at any time prior to or following the program. Applications must be completed and submitted by no later than **30 days prior to the program date** in order to facilitate re-accreditation in advance of the delivery of the program.

Applicants must not indicate in their promotional materials or agenda that a program is eligible for EDI Professionalism Hours (including that an application for accreditation or re-accreditation has been submitted or that accreditation is pending) until they have received a **Notice of Accreditation or Re-Accreditation** from the Law Society for the program.

Section 1: Provider and Program Information

Previous application and supporting materials attached:

Provider Name:

Contact Name and Title:

Contact Phone:

Contact Email:

Program Title:

Date of Notice of Accreditation (if applicable):

Section 2: Re-Accreditation Information

Applicants are encouraged to review the [Accreditation Criteria for Professionalism Hours](#) prior to completing this section of the Application.

Provide the information requested below for each session(s) of the accredited program that you are seeking accreditation for EDI Professionalism Hours, **including identifying the applicable equality, diversity and inclusion topic(s) and describing the connection between the content and the EDI criteria.**

Only those sessions of the accredited program that are listed and described as required will be assessed for accreditation for EDI Professionalism Hours. If the program contains more than **three** sessions that include EDI content, describe those additional sessions in [Appendix "A"](#) to this Application.

Session 1:

Title/Description:

Total Professionalism Hours Accredited:

EDI Professionalism Hours	All other Professionalism Hours (<u>excluding</u> EDI Professionalism Hours)

Brief description of the connection between the content and [EDI criteria](#):

Session 2:

Title/Description:

Total Professionalism Hours Accredited:

EDI Professionalism Hours	All other Professionalism Hours (excluding EDI Professionalism Hours)

Brief description of the connection between the content and [EDI criteria](#):

Session 3:

Title/Description:

Total Professionalism Hours Accredited:

EDI Professionalism Hours	All other Professionalism Hours (excluding EDI Professionalism Hours)

Brief description of the connection between the content and [EDI criteria](#):

Section 3: Declaration

Please check the applicable box.

Application submitted **before** program date.

By submitting this Application, I confirm that the EDI content will be delivered in accordance with the materials and information provided. If the content varies from that which is presented in this Application and/or the re-accreditation granted, I agree to notify the Law Society immediately in order to adjust the EDI credit available for the program.

Application submitted **after** program date.

By submitting this Application, I confirm that the EDI credit requested was completed in the program.

Name:

Date: