



**STATE OF LOUISIANA
BOARD OF EXAMINERS OF
NURSING FACILITY ADMINISTRATORS**

www.labenfa.com

Phone: (225)295-8571

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5647 Superior Drive, Baton Rouge, LA 70816-6049

**REQUEST TO TAKE
CONTINUING EDUCATION COURSE**

§509. Subjects for Examination and Continuing Education

- A. The following shall be considered as guidelines with respect to the subjects for the written examination and continuing education:
 1. management and administration;
 2. environmental health and safety;
 3. resident care;
 4. therapeutic and support care services;
 5. laws, rules, regulations, and guidelines affecting long-term care.

NOTE: If the organization offering your seminar has not had it approved by either LABENFA or NAB/NCERS, you may make an individual request with this form. You must attach program information showing content, agenda, date, instructors, etc.

Attach \$50.00 payment to the application for review and approval. (Payable to LABENFA)

Note: Payments may be made by credit card. Call office for details.

1. Date of request: _____

2. Title of course to be taken: _____

3. Organization offering course: _____

Phone: _____

4. Number of Clock Hours requested (full and half hours, only): _____

5. Date and meeting place course is offered (all requests must be submitted before they begin):

6. Name of Instructor(s): _____

Your Name: _____

Phone: _____

Address: _____

FAX: _____

Email: _____

Approved Hours: _____

Mark A. Hebert, Executive Director

Be sure to include a copy of this signed "Request to Take" AND your certificate to verify approval for re-registration.

Date Approved: _____ Date Paid: _____ Ck #: _____