



## *NCCAOM<sup>®</sup> PDA Course Highlights Application*

PDA Providers are offered an optional advertising service entitled *NCCAOM PDA Course Highlights*. NCCAOM will post the Provider information and their PDA approved course to the NCCAOM website for a period of one month. To apply, the Provider should submit this application to the PDA Department.

The PDA Department agrees to post the PDA Provider and their approved course information to the NCCAOM website under three main tabs: Education; Resources; and Certification. The advertisement is a sliding display featuring the Provider and the course information. Once the application is received in the PDA Department, the information will be entered into the sliding display and posted at the next scheduled date for a period of one month. All PDA providers who purchase the *NCCAOM PDA Course Highlights* promotional service must agree to the following terms and conditions:

1. The Provider's course must be approved by the NCCAOM PDA Department and payment made in full prior to inclusion in the *NCCAOM PDA Course Highlights*.
2. The *NCCAOM PDA Course Highlight Application* fee is \$200 per course, for display on the NCCAOM website for a period of one month.
3. Applications will be accepted on a first come, first serve basis, and must be received in the PDA Department no later than five (5) business days before the end of each month.
4. The PDA provider shall email the *NCCAOM PDA Course Highlight Application* and payment to the PDA Department at [PDACourseHighlights@TheNCCAOM.org](mailto:PDACourseHighlights@TheNCCAOM.org).
5. Active NCCAOM Diplomates who are approved PDA Providers will receive a 10% discount (\$180). Non-Profit associations and organizations approved by the PDA Department will receive a 50% discount (\$100).
6. A maximum of eight (8) featured courses are available for display per month. Due to limited space and to be fair to all, Providers are allowed to submit one (1) *NCCAOM PDA Course Highlight Application* per month.
7. The Provider has the option to include their picture and/or logo in the sliding display. Accepted file types include jpeg or png. If no picture/logo is submitted, the PDA Department will select an educational picture to be used in the design.
8. A sample of the sliding display will be emailed to the Provider for approval prior to posting on the NCCAOM website.



Email this application to [PDACourseHighlights@TheNCCAOM.org](mailto:PDACourseHighlights@TheNCCAOM.org)

PDA Provider Name:	
Responsible Party:	Email:
Contact Person:	Email:

Course Information	Provider #	Course #	PDA Points	Fee: \$200 for one month	
Course Title:					
Website Address:					
Course Type: <input type="checkbox"/> Live <input type="checkbox"/> Webinar <input type="checkbox"/> Distance Learning <input type="checkbox"/> Conference <input type="checkbox"/> Overseas Tour					
Enter Begin Date, End Date for Webinars. Include City, State & Country for live presentations.					
Begin Date:		End Date:			
City:		State:		Country:	
PDA Provider Logo and/or picture attached: <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> jpeg <input type="checkbox"/> png					
The promotional payment is paid for featured course inclusion in the <i>NCCAOM® PDA Course Highlights</i> to be posted to the NCCAOM website for one month.			Total Payment:		

Payment Instructions:

1. Email this application to [PDACourseHighlights@TheNCCAOM.org](mailto:PDACourseHighlights@TheNCCAOM.org).
2. Once this application is reviewed and approved, staff will email a confirmation to the Provider.
3. The Provider will then login to their NCCAOM PDA Portal [here](#).
4. There will be a 'System Message' that states 'You have a pending balance'. Click on the 'Pay Now' button.
5. Check the box on the left of 'Course Highlights' and then select payment method using the drop-down menu at the bottom of the page. Then click 'Submit' to enter payment information.
6. Click 'Pay Now' once everything is entered and a receipt will be sent to the Responsible Party's email address.

\*\*\*\*\*For NCCAOM Use Only\*\*\*\*\*

Provider #:                      Application Received:                      Dates Posted to Website:

Date Payment Submitted:

Notes: