

Every 3 years, Associate Professional in Talent Development (APTD) and Certified Professional in Talent Development (CPTD) credential holders must earn recertification points demonstrating their continued growth in the field. APTD credential holders must earn 40 points and CPTD credential holders must earn 60 points toward recertification by completing activities aligned with the capabilities outlined in ATD's Talent Development Capability Model ([capability.td.org](http://capability.td.org)).

Candidates who wish to become certified must complete professional development in the Developing Professional Capability and Impacting Organizational Capability domains of the Talent Development Capability model. APTD candidates must complete 28 professional development hours and CPTD candidates must complete 60 professional development hours to be eligible to take the certification exam.

Preapproval status, for courses offered by the applicant, is valid for both recertification and initial application professional development hours. Preapproved providers will:

- Receive an ATD CI digital badge and approved language to use when communicating preapproval status in marketing materials.
- Be included in a directory of APTD and CPTD preapproved providers posted on the [td.org](http://td.org) website with a link to their organization's offerings.

## Qualifications and Guidelines

Qualifying programs include conferences, college or university courses, seminars, webinars, and e-learning programs offered by the applicant that meet the following qualifications:

- The provider must have the resources, facilities, and administrative support to effectively develop and deliver talent development-related programming.
- The provider must offer relevant high-quality programming, developed and presented by appropriate subject matter experts.
- The program content must be related to talent development as defined by ATD's Talent Development Capability Model. See [www.td.org/capability-model](http://www.td.org/capability-model) for details.
- Approval and credits are awarded based on the educational time spent on talent development-related topics at the rate of one point per contact hour.
- Meals, breaks, networking, pre-work and non-talent-development-related topics do not count towards contact hours.
- Pre-approved providers may calculate the number of hours based on the above guidelines at .5 per 30 minutes of instruction. Programs must be at least 30 minutes in length to qualify.
- Participants must be able to obtain proof of attendance or completion.
- Attendees will be responsible for obtaining proof of attendance and reporting the number of hours earned for programs where attendance is not taken at each session (eg: conferences).



# Preapproved Provider Application

**Please provide the following information about the organization delivering the program(s) seeking professional development preapproval status:**

Name of Organization: \_\_\_\_\_

Organization Website: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Email Address for Primary Contact: \_\_\_\_\_

Email for Digital Badge (not tied to specific person): \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Country: \_\_\_\_\_

**Organization Type:**

- College or University
- Professional Association
- Educational Provider
- ATD Chapter: \_\_\_\_\_ (CHIP Code)

**Tax Status:** \_\_\_\_\_ **Country of Tax Status:** \_\_\_\_\_

- For Profit
- Not-for-Profit

**Locale(s) where you offer your program(s)?**

- Virtual Only
- In-Person (list a sample of locations below)
- Hybrid

Locations: \_\_\_\_\_

**Approximately how many programs do you offer per year?**

- 1-10 Programs
- 11-25
- 26-50
- Over 50

How many of those programs are conferences? \_\_\_\_\_

**What method(s) are used to deliver the programs? Check all that apply:**

- In-Person
- Online
- Blended
- Other, please specify: \_\_\_\_\_

**Please indicate in which talent development capabilities your organization provides programming:**

**Personal Capabilities:**

- Communication Skills (Written & Verbal)
- Emotional Intelligence & Decision Making
- Collaboration & Leadership
- Cultural Awareness & Inclusion
- Project Management
- Compliance & Ethical Behavior

- Career & Leadership Development
- Coaching
- Evaluating Impact

**Professional Capabilities:**

- Learning Sciences
- Instructional Design
- Training Delivery & Facilitation
- Technology Application
- Knowledge Management

**Organizational Capabilities:**

- Business Insight
- Consulting & Business Partnering
- Organization Development & Culture
- Talent Strategy & Management
- Performance Improvement
- Change Management
- Data & Analytics
- Future Readiness

**Describe the process used to select the faculty/facilitators for your programs:**

**Describe the process and interval used to evaluate the performance of faculty, facilitators, trainers and instructional designers:**

**Describe the process used to develop the program content and materials:**

**Describe the process used to evaluate your programs:**

**Describe the process for using program evaluation data to modify/refine your programs and frequency for doing so:**

**Describe or attach your refund policy:**

**Describe the process or policy that outlines how a learner's information may be released to the learner or other entity:**

**What are the requirements for participants to earn completion status?**

- Full participation in the program and completion of an assessment
- Full participation in the program and completion if assigned work or final product
- Full participation in the program
- Attendance at the program

**How is participant attendance or completion monitored?**

- Attendance taken at every session and assessment or outside work is reviewed
- Attendance taken at every session by a session monitor or electronic badge
- Attendance is confirmed by LMS or other system that participant was present



# Preapproved Provider Application

List the URL where interested APTD and CPTD certification holders and candidates may find information about your programs. This link will appear on the td.org website.

Please describe your organization in 350 characters or less (including spaces), This description will appear on your organization's digital badge.

## Application Process

Organizations that become pre-approved providers of programming eligible towards ATD CI professional development hours should follow these steps:

1. **Apply:** Submit a signed and completed application along with examples of timed agendas and learning objectives for at least three (3) recent or upcoming programs. Please save your completed application with your organization's name included in the filename and email to [recertification@td.org](mailto:recertification@td.org). Please retain a copy of your application for future reference because it contains the program guidelines to which you have agreed.
2. **Payment:** Once you have submitted your application, you will receive an electronic invoice for a non-refundable \$250 fee that will cover course preapprovals for a 12-month period. [Note: ATD Chapters qualify for discounted rate of \$100].
3. **Approval:** Once the fee has been paid, the application will be reviewed and the primary point of contact will receive official confirmation of approval, language to be used on course materials and instructions for claiming your digital badge. Please allow ten (10) business days for your application to be reviewed.
4. **Denial:** If an application is denied, the provider may appeal the decision within 30 days. If the denial is upheld, the provider must wait one year from the date of submission to reapply.

## Terms and Conditions

We acknowledge that the information provided in this application is correct. We agree that if ATD CI professional development preapproval status is awarded, we will comply with the following guidelines:

- We agree to follow the ATD CI guidelines to assign the appropriate number of professional development points to our programs.
- We agree to maintain clear tracking of all educational events, courses, webinars, and CE hours provided to participants during the approval timeframe. We acknowledge that ATD CI can request an audit of all training records (providers will be given 60 days upon audit request to collect the requested documents.)
- We agree to provide program participants with verification of attendance-such as a certificate of completion, email notification, or materials distributed on-site that shows the number of ATD CI professional development points assigned to the educational activity.
- We acknowledge that if approved, our preapproval status will be valid for one year from the time of application.
- We acknowledge that ATD CI reserves the right to maintain the quality and integrity of the APTD and CPTD certification programs by designating preapproval status only when qualifications are met. ATD CI has the right to terminate preapproval status if there is evidence of failure to uphold preapproval guidelines.
- ATD CI retains the authority and final discretion on the acceptability and approval of all programs. Approval is made at ATD CI's discretion and ATD CI reserves the right to deny or revoke approval at any time.
- Status as an ATD CI Approved Provider is non-transferable. An individual, corporation, association, organization, educational institution, governmental agency, or private practitioner cannot sell, barter, partner or by any means, allow the use of the ATD CI Approved Education Provider status or digital badge to any other training, individual, corporation, association, organization, educational institution, governmental agency or private practitioner.



## Preapproved Provider Application

- We acknowledge that Preapproval status is for the award of credits toward ATD CI initial certification eligibility or recertification professional development credits/hours that meet the necessary requirements. Preapproval status in *no way* conveys membership, sponsorship, or a role as an educational partner to offer ATD programming or as an ATD Professional Partner.
- Status as an ATD CI Approved Provider does not convey or permit the use of any logo or image other than the ATD CI Approved Provider digital badge issued for the duration of the approval period of one year.

Contact Name (printed): \_\_\_\_\_

Signature \_\_\_\_\_

Date: \_\_\_\_\_