



KIPS

KINESIOLOGY INSTITUTE FOR
PERFORMANCE SPECIALISTS

RECERTIFICATION GUIDE

Application Checklist

- Complete application form
- Payment information & payment included
- Submit between 90-1 days prior to recertification expiration
- Submit OFFICIAL proof of CEU completion

Digitally Submit To:

KIPS BOC

ATTN: Recertification

boc@kipsonline.org

Continuing Education Requirements

The KIPS Board of Certification (BOC) requires its certified professionals to complete 2.0 Continuing Education Units (CEUs) over a two year period. Each 0.1 CEU is worth one hour of study time or one contact hour in a live training format.

The KIPS BOC has chosen a two year time frame for renewal as scientific research and the application of that research changes over the course of a two year period. Continuing education requirements are intended to promote continued competence, development of knowledge and skills, and enhancement of professional skills and judgment beyond the levels required for entry-level practice. Continuing education activities must focus on increasing knowledge, skills and abilities.

All KIPS BOC approved coursework is listed at: <https://kipsonline.org/approved-providers/>.

Recertification Fees and Payment Options

The fee for recertification for a KIPS BOC recognized certification is \$99. Fees and recertification applications with the necessary CEU credits accomplished must be received by the KIPS BOC on or before certification expiration date (as shown on the KIPS Certification Award) to avoid late fees and ensure reception of certification renewal within 90 days of certification expiration.

Late applications for recertification will be accepted by The KIPS BOC between 1-90 days after expiration. Late applications will require an additional \$30 fee. After 90 days following certification expiration, KIPS-issued certifications will be null and void.

Recertification Fee	\$99 (between 90-1 day(s) prior to expiration)
Late Application Fee	\$30 (between 1-90 days late)

Fees are payable by: Visa/MasterCard/Amex Money Order/Cashier's Check

Category Requirements

Category A - KIPS Approved Provider Offerings

- The KIPS will make final determinations for actual CEUs awarded for any live training course, home study course, workshop, conference, symposium or seminar.
- Courses that are not listed as approved by KIPS will require completion and submission of a petition form for recognition (found at the end of this guide) and a petition fee.

Category-A	Number of CEUs	Required Document
Workshops	0.1 CEUs per contact hour	Certificate of completion
Home study courses	0.1 CEUs per contact hour	Certificate of completion
Conferences	0.1 CEUs per contact hour	Certificate of completion
Other approved courses	0.1 CEUs per contact hour	Certificate of completion

Category B - Post-Certification Collegiate Work

CEU's are awarded for successful completion of college or university courses, if the content falls within the subject domains.

Category-B	Number of CEUs	Required Document
College/university course (semester)	0.5 CEUs per credit hour	Official transcript
College/university course (quarter)	0.3 CEUs per credit hour	Official transcript

Category C - Industry Contributions

CEU's are awarded for activities considered contribution towards the health & fitness industry. This may be but is not limited to speaking engagements on topics related to health and fitness.

Category-C	Number of CEUs	Required Document
Panelist at a conference	0.1 CEUs per contact hour	Certificate of completion
Speaker at a conference	0.1 CEUs per contact hour	Certificate of completion
Primary author in a peer-reviewed publication	0.5 CEUs	Copy of article; writer guidelines
Primary author in a textbook	0.5 CEUs	Copy of cover, table of contents, 500-word summary of contribution to industry

Petition for CEUs

Coursework that is consistent with the content of the performance domains but not pre-approved by the KIPS BOC will require completion and submission of the petition form available at the end of this guide. A \$25 petition fee is required with submission of petition for each course to be reviewed.



Recertification Application

Please note, the KIPS BOC accepts applications starting at 90-days prior to the expiration date listed on your certificate.

Today's Date: _____

Certification Type: Group Exercise Instructor Wellness Coach Personal Trainer

Certification Number: _____

Contact Information

Contact Name (First & Last): _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Contact Phone Number: _____

Contact E-Mail: _____

Fees

Recertification Fee	\$99	=	_____
Late Fee (1-90 days)	\$30	=	_____
Total CEU Petition Fee (if applicable, \$25/course)		=	_____

Total

Total Fees \$ _____

Payment Information

Method of Payment

Visa Mastercard AMEX Discover

Account Number _____ Expiration Date _____

CVV Code _____ Name on Card _____

Signature _____

CEU COURSEWORK

Course Title	Provider Name	Course Date(s)	# of CEUs	Category

The information contained on this report is a true and accurate statement of my continuing education activities.

I am aware that falsification of this report may result in the revocation of my KIPS certification.

Signature _____ Date _____



Continuing Education Petition Form

Non-KIPS approved continuing education courses can be reviewed by petition only. A \$25 nonrefundable administrative fee is required for each course/event petitioned. Please be sure to include all relevant information and attach any supplemental information for the KIPS BOC to review.

Contact Information

Name (First & Last): _____
Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Phone Number: _____
E-Mail: _____

Course Information

Course Name: _____ Date(s): _____
Description of course:

Type of course: Workshop Home Study Conference Other

Provider Information

Course Provider: _____ Contact Hours: _____
Street Address: _____
City: _____ State: _____ Zip: _____
Home Phone: _____ Work Phone: _____
Email: _____ Website: _____

Payment Information

(complete below if petitioning prior to recertification, otherwise add total to Recertification Application above)

Payment of petition fee: \$25/course x _____ (Quantity) = _____ (Total Fee)

Method of Payment

Visa Mastercard AMEX Discover

Account Number _____ Expiration Date _____

CVV Code _____ Name on Card _____

Billing Address _____

Signature _____