



## **Approved Provider Promotional Materials Checklist (for quick reference)**

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|---|--|
| Objectives  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Prerequisites   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Qualifications & Credentials                            | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Schedule  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Number of CMTEs Offered                                 | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Can Correct Number of CMTEs Be Calculated from Schedule | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Cost  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Cancellation & Refund Policy                            | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Statement of Relationship:                              | <input type="checkbox"/> Yes <input type="checkbox"/> No |

[Title of Opportunity] is approved by the Certification Board for Music Therapists (CBMT) for [# of CMTEs] Continuing Music Therapy Education credits. The [CBMT Approved Provider Name, Provider Number] maintains responsibility for program quality and adherence to CBMT policies and criteria.