

**NYS Licensees eligible for continuing education credits are:  
Life/Accident and Health Agents and Brokers,  
Certified Financial Planners (CFPs)  
Life consultants**

## **To Register You Must:**

- 1. Go to the website and select the training date you wish to attend**
- 2. Call (518) 474-0662 to Pre-register**
- 3. Send completed registration form along with non-refundable fee to:**

**NYS Partnership for Long-Term Care  
875 Central Ave  
Albany, NY 12206**

- 4. Complete the E-learning on-line course ([www.nyspltc.org](http://www.nyspltc.org)) before you attend the classroom training.**

***The NYS Department of Insurance requires that the mandatory E-Learning exam be given prior to the 4-hour classroom training.***

***Anyone who fails to get a passing grade on the exam will be allowed one retake at another time, at no additional charge.***

**For additional information call (518) 474-0662.**

**REGISTRATION FORM**  
**New York State Partnership for Long-Term Care**



Provider approval #: NYPO-100417, Course Approval #NYCR-209135  
Course approval #: NYCR-209343, Course approval #: NYCR-217256

**Training date:** (mm/dd/yyyy) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Training location:**

- Albany                       Buffalo                       Long Island                       New York City  
 Rochester                       Syracuse                       Other \_\_\_\_\_

**Registration Options & Fees**

*Please check all that apply*

- Mandatory Training and Certification (8 CEUs)** ..... \$ 120.00  
In order to sell or market Partnership Insurance, licensed agents, brokers, or CFPs must complete both the online E-Learning self-study course and the 4-hour classroom session.
- Advanced Refresher Course (3 CEUs)** ..... \$ 60.00  
This course provides advanced partnership information, and an update on Medicaid. While anyone can take this course, only Partnership certified agents, brokers, or CFPs are eligible to earn CE credits for this course.
- Certified Financial Planner (CFP) Credits** ..... additional \$ 7.00  
In addition to Department of Insurance credit, all CFPs who meet the Partnership certification requirements are also eligible to earn CEUs towards their CFP for the mandatory training certification or refresher course.

*For full course descriptions and requirements, please see our website [www.nyspltc.org](http://www.nyspltc.org).*

*The following fields must be completed*

**Name:** \_\_\_\_\_

**Mailing address:** (If using a business address, please specify company name, suite, floor, etc.)

Line 1 \_\_\_\_\_

Line 2 \_\_\_\_\_

City, State Zip code \_\_\_\_\_

**Daytime phone number:** ( \_\_\_\_\_ ) \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Agents and CFPs must also complete this section to receive CE credits.**

**NYS Insurance License #** \_\_\_\_\_

**Last 4 digits of Social Security #** \_\_\_\_\_

**CFP Board #** \_\_\_\_\_

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Name \_\_\_\_\_ License # \_\_\_\_\_

Please complete the following questions:

**1. Which of the following credentials do you presently hold? (Check all that apply.)**

- NYS Licensed Agent       NYS Licensed Broker       Certified Financial Planner  
 Other \_\_\_\_\_

**2. How long have you been an Agent, Broker and/or Certified Financial Planner?**

- 5 years or less       6-10 years       11-20 years       21 years or more       Not applicable

**3. How long have you sold long-term care insurance?**

- 5 years or less       6-10 years       11-20 years       21 years or more       Not applicable

**4. Please rate your overall knowledge of long-term care insurance.**

- Poor       Fair       Good       Very Good       Excellent

**5. Please rate your overall knowledge of the New York State Partnership.**

- Poor       Fair       Good       Very Good       Excellent

**6. Why are you taking this course? (Check all that apply.)**

- Mandated       Expand personal knowledge       CEUs       Other \_\_\_\_\_

**INSTRUCTIONS**

Please send this completed Registration Form and check or money order to **NYS Partnership for Long-Term Care, One Commerce Plaza, Room 826, Albany, NY 12210**. These items should be received no less than 14 business days prior to the course.\* Checks should be made payable to: **NYS Partnership Program/HRI**. (\*Please Note: Your certification will not be processed until your check has cleared. To avoid any delay in your certification, you may provide a certified check or money order).

**Confirmation** of receipt of these items will be emailed to you.

**Cancellation policy:** The registration fee, \$120 for Certification (\$127 for CFP credit) or \$60 for Refresher (\$67 for CFP credit) is non-refundable. If you are not able to attend the course you registered for, you may reschedule once. The course must be taken within 12 months of the original date. If you need to reschedule more than once, you will be required to pay the registration fee again.

**Course availability policy:** First come, first serve to those who complete the entire registration process.

For Partnership office use only:

\$120.00       \$127.00       \$60.00       \$67.00      Check Number \_\_\_\_\_