



**BOARD OF EXAMINERS OF NURSING CARE INSTITUTION ADMINISTRATORS AND
ASSISTED LIVING FACILITY MANAGERS**

Katie Hobbs
Governor

1740 West Adams, Suite 2490 Phoenix, Arizona 85007
(602)364-2374 phone
site: www.nciaboard.az.gov

Jack Confer
Executive Director

January 3, 2023

The NCIA Board has implemented an online payment system for continuing education. We prefer that you use a credit card; however, you are still able to send in a check and the completed paper application if desired.

All CEU sponsor and CEU renewal applications can be submitted and paid for by credit card by clicking on this link: <https://nciapay.az.gov/>.

Attached below is the CEU-sponsor form and instructions on how to submit the form and payment using the new site.

If you have any questions you can contact me at 602-542-5993 or elizabeth.bronold@aznciaboard.us.

Sincerely,

A handwritten signature in cursive script that reads "Elizabeth Bronold".

Elizabeth Bronold
Project Specialist



BOARD OF EXAMINERS OF NURSING CARE INSTITUTION ADMINISTRATORS AND
ASSISTED LIVING FACILITY MANAGERS

Continuing Education Course Application- Sponsor

Sponsor Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Contact Person: _____ Title: _____

This course is for: Managers Administrators

Teaching method: Classroom Online Webinar Self-Study Other: _____

Title of Course: _____

Requested Hours: _____

Subject Areas: Statutes/Rules Principles of Management Psychology Patient Care
 Personal/Social Care Therapeutic/Supportive/Nutrition/Pharmacology/Disease Resources Patient Rights
 Quality Assurance Ethics Recordkeeping

Date Course Offered: _____ Time: _____

Location Address: _____

Instructor: _____

Signature: _____ Date: _____

Requirements:

- Copy of any examination that will be given to those who attend the continuing education;
- Curriculum vitae of each instructor;
- Agenda of the continuing education showing the hours of instruction;
- Certificate of attendance that meets the requirements in R4-33-501(D);
- Copy of any brochure prepared regarding the continuing education; and
- \$10.00 for each hour of continuing education

FOR OFFICIAL USE

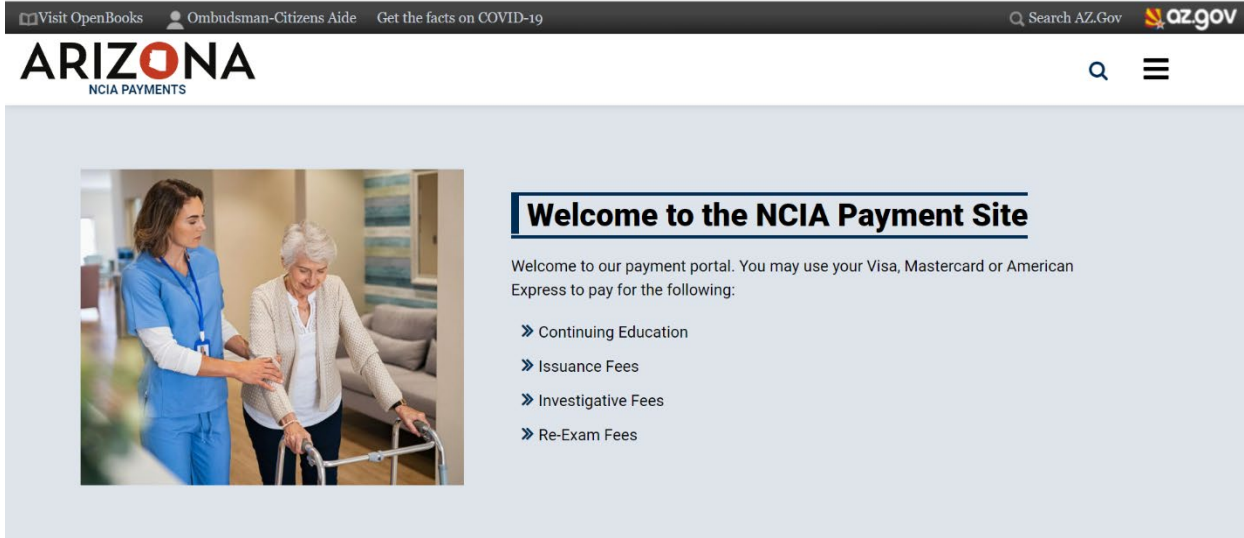
Course approval #: _____ Hours approved: _____ Receipt #: _____

Approved Date: _____ Expiration Date: _____

Approved by: _____

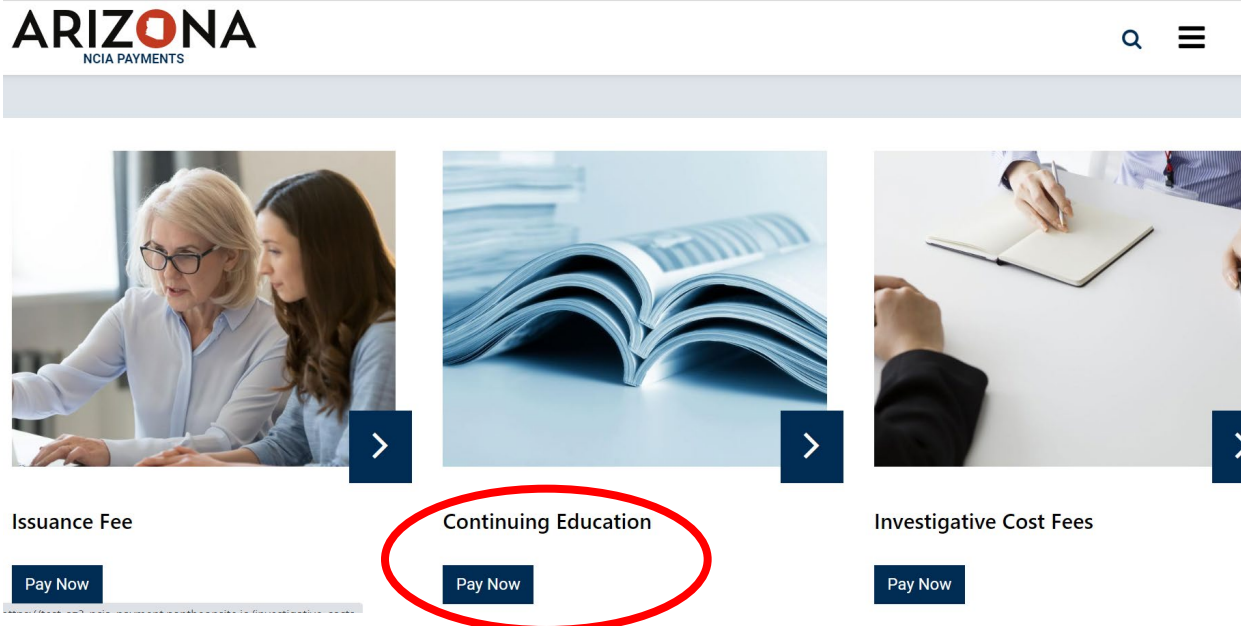
CONTINUING EDUCATION- SPONSOR

You can submit your CEU sponsor application by following this link to the NCIA Board payment site: <https://nciapay.az.gov/>



The screenshot shows the top navigation bar with links for 'Visit OpenBooks', 'Ombudsman-Citizens Aide', and 'Get the facts on COVID-19'. The 'ARIZONA NCIA PAYMENTS' logo is on the left, and a search bar and menu icon are on the right. The main content area features a photo of a nurse assisting an elderly woman with a walker. To the right of the photo is a heading 'Welcome to the NCIA Payment Site' followed by a welcome message and a list of services: Continuing Education, Issuance Fees, Investigative Fees, and Re-Exam Fees.

Select Continuing Education



The screenshot shows three payment options in a row. Each option has a representative image, a title, and a 'Pay Now' button. The 'Continuing Education' option is circled in red. The 'Issuance Fee' option has a 'Pay Now' button that is partially obscured by a grey bar.

Option	Image Description	Label	Pay Now Button
Issuance Fee	Two women in business attire looking at a document.	Issuance Fee	Pay Now
Continuing Education	An open book with blue pages.	Continuing Education	Pay Now
Investigative Cost Fees	Hands writing in a notebook on a desk.	Investigative Cost Fees	Pay Now

Fill in the required information

ARIZONA
NCIA PAYMENTS

Search [] Menu []

First Name *

Last Name *

Address

City/Town

State/Province

ZIP/Postal Code


Email *


Phone Number *

Total Course Hours *

The cost at the end is generated based on how many hours are entered into the Total Course Hours category

In the attachment section please attach any supporting documents. A list of requirements can be found on the CEU-Sponsor application form

 Total Course Hours *

 Attach Documentation *

One file only.
100 MB limit.
Allowed types: txt, rtf, pdf, doc, docx, odt, ppt, pptx, odp, xls, xlsx, ods.

Then select Preview

Preview

Next you will see a preview of your application




Continuing Education Course Application- Sponsor

Customer Information


First Name Elizabeth
Last Name Bronold
Address 150 N 18th Avenue, 4th Floor
Phoenix, Alaska. 85007
Email Elizabeth.Bronold@aznciaboard.us
Phone Number 6023642536
Total Course Hours 4

Attach Documentation

 Duplicate Manager Certificate Form (1).pdf

Payment Detail

Scroll down and you will see a break down of your payment that is due. The number you want to look at to verify that the payment is for the correct amount is the Total amount at the bottom. The total on the screen is \$40 because I entered in 4 hours of CEUs that I am requesting. 4 hours x \$10 an hour = \$40

 Duplicate Manager Certificate Form (1).pdf

Payment Detail

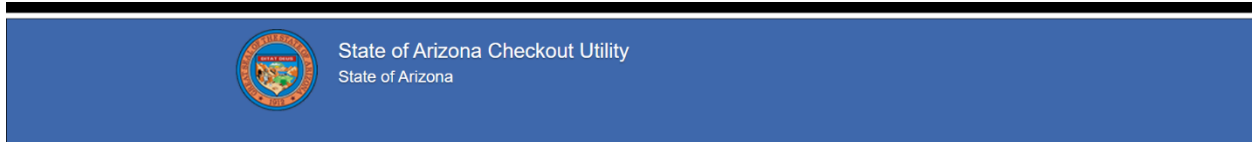
Product Code	Description	Quantity	Amount	Tax %	Total
NCA00043	Continuing Education 90%	4	USD 9.00	0	USD 36.00
NCA00044	Continuing Education 10%	4	USD 1.00	0	USD 4.00
Total amount			USD 40.00		

[< Previous](#) [Submit](#)



Then select submit

When you click submit it will bring you to the payment page where you can enter in your credit card information.




Payment Information

CHECKOUT - PAYMENT INFORMATION

*First Name	*Last Name
<input type="text"/>	<input type="text"/>
*Billing Address	*City
<input type="text"/>	<input type="text"/>
*State	*Zip
<input type="text" value="---Click to Select---"/>	<input type="text"/>
*Email	*Phone Number
<input type="text"/>	<input type="text"/>


Credit Card
 Electronic Check



Credit Cards issued by a foreign bank or entity are not an acceptable form of payment due to the system's inability to confirm security measures. As an alternative, please use a secured or prepaid Credit Card issued by a US entity or bank.

*Credit Card Number

*Expiration Date *CVV/CSV

Month Year 

Click Continue

Scroll to the bottom of the page and click Authorize

Order No	Product ID	Item Description	Amount	Quantity	Total Amount
104	NCA00019	Manager Certificate 90%	\$270.00	1	\$270.00
104	NCA00020	Manager Certification 10%	\$30.00	1	\$30.00
104	NCA00055	Convenience Fee	\$3.00	1	\$3.00
Total					\$303.00

Note:

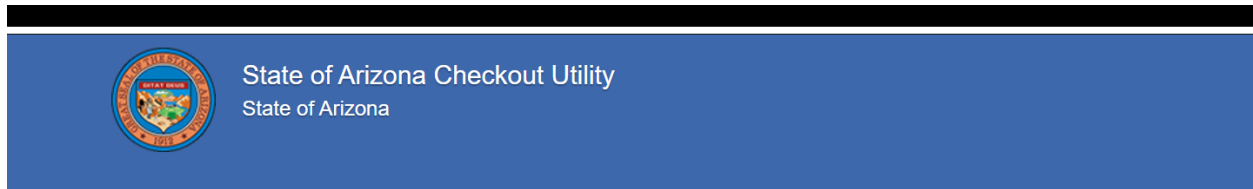
I understand that the following amount will be billed to my credit card. My credit card statement will show the following merchant name(s) and amount(s) for this transaction.

Merchant	Amount
BOARD OF EXAM NURSING CARE	\$303.00

The total amount to be billed to your credit card is \$303.00.

[Previous](#) [Authorize](#)

When you have Authorized the payment, you will be taken to the receipt page. Press Continue.



Receipt

Thank you for your payment. Your payment was successful.

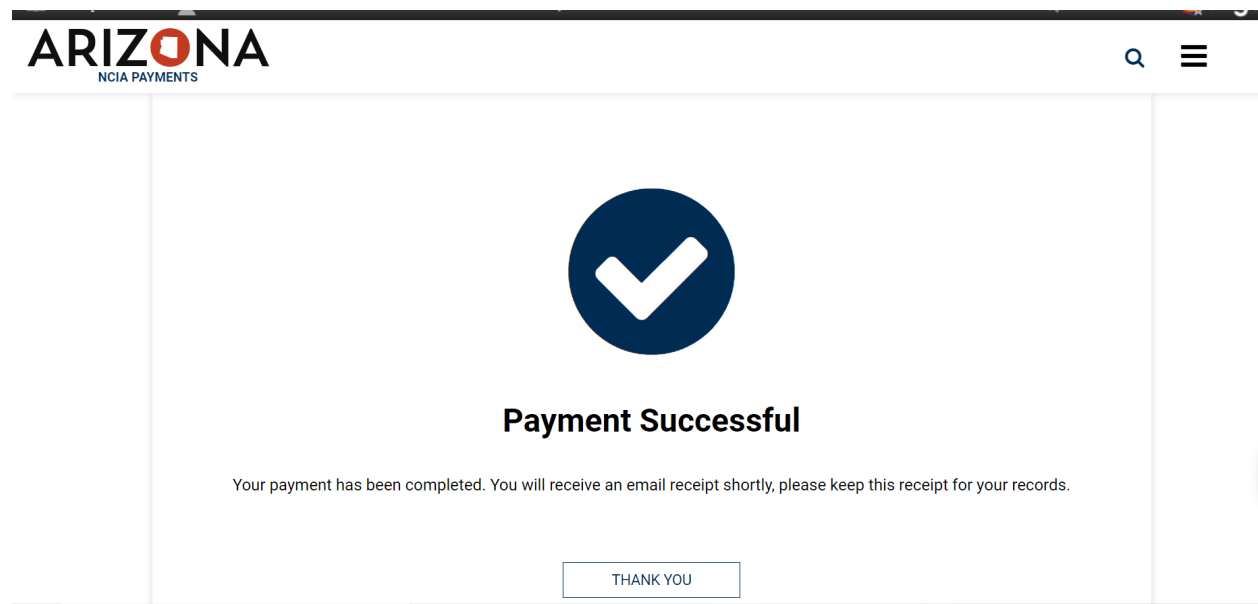
Do not close this window. Click the "Continue" button to return to the Agency application.

YOUR PAYMENT IS COMPLETE

Payment is complete. Print this receipt for your records.
Your authorization number is **532762**.
Please reference this number in any correspondence regarding your transaction. [Get the Adobe Acrobat Reader](#)

[Download receipt](#) [Continue](#)

You will know your payment was successful when you see the blue circle with a white checkmark in it.



You will receive an email with the receipt attached confirming your payment.