

California Board of Recreation and Park Certification, Inc

Established in 1954 Non-Profit Corporation California Promotes Pride and Excellence in the Profession
P.O. Box 2137 Fall Brook CA 92088 V/M/T: 661 538-1332 Email: cbrpcca@gmail.com
Website: cbrpc.org

DATE: July 15, 2021

TO: **Therapeutic Recreation Fieldwork/Internship Agency sites**

FROM: CBRPC

SUBJECT: FALL 2021 AGENCY RENEWAL & PAYMENT FORMS

Complete the following information and payment fee form and return to: CBRPC Office postmarked **no later Friday September 10, 2021 to avoid the late fee.**

Renewals received after that deadline date to expiration date (September 30th) will be considered late and will be required to pay the late fee. Renewals will not be processed until appropriate fees are paid. Renewals received after the Agency Certificate expiration date (September 30, 2021) are considered expired and will be required to go through the new agency application process.

REQUIRED DOCUMENTATION AND FEE (review and complete attachments): If paying by credit card- Scan and attach card information and renewal forms to email as a pdf file to cbrpcca@gmail.com

If paying by check or money order- complete the payment form- mail the check and renewal forms to: CBRPC PO Box 2137 Fallbrook, CA 92088.

IMPORTANT:

Minimum number of required Internship hours: **600 hours.** Agencies can require more hours, but not less. ***Be sure to include the names of students who have completed their internship in the past year with your agency renewal (page 4-one for each student).

FALL 2021 AGENCY RENEWAL PAYMENT INFORMATION

Name of Renewal Agency:

Print Clearly

CHECK/MONEY OREDR FEES	Check that apply	Amount
RT Internship Agency Renewal		\$ 75.00
RT Internship Agency Renewal LATE PAYMENT FEE applies Sept. 11 to September 30, 2021		\$135.00
CREDIT CARD PAYMENT (includes \$5 processing fee)		Amount
RT Internship Agency Renewal		\$ 80.00
RT Internship Agency Renewal LATE PAYMENT FEE applies Sept. 11 to September 30, 2021		\$140.00
TOTAL AMOUNT PAID		\$

CHECK/ CASHIER'S or MONEY ORDER PAYMENT:

Payment by Check/ Money Order # _____

(attach/enclose check/money order) Make payment payable to: CBRPC

Mail to: CBRPC PO Box 2137 Fallbrook, CA 92088

Or

CREDIT CARD PAYMENT- please check one:

Card Number:
<div style="display: flex; justify-content: space-around; font-size: 2em; font-family: monospace;"> □□□□-□□□□-□□□□-□□□□ </div>
Credit Card Expiration Date:
Cardholder Name:
Cardholder Signature:
Cardholder Mailing Address: _____
Cardholder phone number:
Cardholder email:
Date of completion:

If making payment by credit card- Send fee attachment with renewal to: cbrpcca@gmail.com

THERAPEUTIC RECREATION INTERNSHIP CONFIRMATION FORM

(Please print or type clearly)

Student's Full Name:	
Mailing Address:	
City:	State: Zip Code:
Email:	
Date of Birth:	Cell Phone (include area code):
University:	
University Faculty Advisor's Name:	
Phone (include area code):	Email:
Date Internship began: / /	Date Internship Completed: / / Total hours completed:
Agency/Organization Name:	
Program/Unit/Department:	
Certified Recreation Therapy Supervisor's Name:	
Title:	
Recreation Therapy Certification numbers: CBRPC -T expiration date: / /	
CBRPC Agency Placement Certification Number (found on your agency certificate):	expiration:
IMPORTANT: If agency is not currently a certified agency, it must obtain certification or be ineligible for TR Interns. Preceptor can be utilized for a maximum of 2 years. One or more of the agency staff must become State certified to be eligible for the agency to become certified for recreation therapy students within the state of CA.	

Agency RTC Representative Verifying Internship Experience:

I _____ declare that the information provided above are accurate and true.

Signature: _____

Certification: CBRPC #	-T Expiration:	NCTRC #	Expiration
------------------------	----------------	---------	------------

Dated: _____