

NAPSA Certificate Application Process for Central California Adult Services Training Academy CCASTA

Funding for the NAPSA application fee and certificate will be paid for by the Central California Adult Services Training Academy. County staff must complete a “NAPSA Certificate Application” form **after** completion of all 23 Core Competency courses. Form must be typed.

Completion of the trainings have to fall between 7/1/2017 and 6/30/2022, a five-year span, in order to be eligible for a certificate and have two years of APS experience.

Staff will have their Supervisor send an email to Cynthia Rodriguez, cynthia@csufresno.edu, to confirm that the staff person has met the two-year full-time work requirement in APS.

CCASTA will validate trainings to ensure completeness.

CCASTA will sign the application form acknowledging all training has been completed and send application and documentation to NAPSA.



Certificate Program Application

Please complete this application to obtain access to the National Adult Protective Services Association (NAPSA) Certificate Program. Please print clearly or click on the Fill & Sign tool in the PDF version. (Note: When in the Fill & Sign mode, you will have to click on the arrow at the bottom of the first page to access the second page.)

Name _____

Position _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Email _____

Date of Application _____

Length of employment with APS _____ If you are assigned to multiple programs (i.e. APS/IHSS) are you time studying more/ less than 50% time to APS?

Time assigned to APS work: More than 50% 50% or less

Please ask your supervisor to verify length of time with APS by providing and attaching email verification. Supervisor

Contact Information Name _____

Phone _____ Email _____

Use the checklist on the back of this form to make sure that you have completed all 23 core competency modules. Submit this application only after you have completed all modules and have either 2 years of full time or 4 years of part time APS experience.

For Office Use Only:

Employment Verification on File Employment Meets Requirements

Name of Verifier: _____ SDSU FRESNO SACRAMENTO

I hereby certify that the applicant has completed the required modules and meets the employment requirements to be eligible for the NAPSA Certificate.

Signature _____

Date _____

Please keep an accurate record of your training for NAPSA Certificate

E= eLearning T= See Transcript

#	Core Competency Topics Please see Catalog for details	E	T	Date	Trainer Name	Location	Office Use only Reviewed
1	Overview						
2	Values/Ethics						
3	Regulations						
4	Aging Process						
5	Physical/Dev. Disabilities						
6	Mental Health in APS						
7	Substance Abuse in Mature Adults						
8	Dynamics of Abusive Relationships						
9	Communication & Interviewing						
10	Self-neglect clients						
11	Caregiver Neglect						
12	Financial Exploitation						
13	Physical Caregiver Abuse						
14	Elder Sexual Abuse						
15	Documentation & Report Writing						
*16	*Investigation First Steps & Worker Safety						
17	Assessing Client Capacity						
18	Risk Assessment						
19	Voluntary Case Planning						
20	Involuntary Case Planning						
21	Collaboration in APS Work						
22	Working with Criminal Justice						
23	Case Closure						

If available, please attach your training transcript. For modules taken outside of your region, please attach certificates of completion or other verifications. Refer to the Core Competency Curriculum Catalog, available from your RTA, to determine which courses meet the requirements for a specific topic area.

***16 – If taking these Modules as an eLearning you must complete both Modules: Investigation First Steps AND Worker Safety.**