

Instructions to complete and submit an activity application.

**Step 1:** Go to <https://ucsd.cloud-cme.com/application.aspx>

**Step 2:** Click the **Create New Application** button.



**Step 3:** Enter the activity information into the application. Click **Save and Continue** at the bottom of each screen, and you will advance to the next application page.

**Basic Activity Information**

- Planners and Faculty
- Gap and Needs
- Objectives and Learning Outcomes
- Commercial Support
- Commendation Criteria
- Signatures
- Files - upload/download
- Comments
- Return To Applications List

**Basic Information**

Specify the following for your activity

Activity Name: \*

Select all that apply:

<input type="checkbox"/> ACCME (Physicians)	<input type="checkbox"/> ANCC (Nurses)
<input type="checkbox"/> ACPE (Pharmacists and/or Pharmacy Technicians)	<input type="checkbox"/> ACA (Osteopathic Physicians)
<input type="checkbox"/> APA (Psychologists)	<input type="checkbox"/> AAPA (Physician Assistants)
<input type="checkbox"/> COPE (Optometrists)	<input type="checkbox"/> ASWB (Social Workers)
<input type="checkbox"/> Non-Accredited	<input type="checkbox"/> Joint Accredited

Activity Type: \*

Activity Format: \*

<input type="checkbox"/> Live Activity	<input type="checkbox"/> Enduring Material
<input type="checkbox"/> Journal-based CME activity	<input type="checkbox"/> Test-item writing activity
<input type="checkbox"/> Manuscript review activity	<input type="checkbox"/> PI CME activity
<input type="checkbox"/> Internet point-of-care activity	<input type="checkbox"/> Learning from teaching
<input type="checkbox"/> Other	

If other format, please specify:

**Save and Continue**

Under the **Planners and Faculty** section be sure to **use @UCSD.EDU** email address and not @health.ucsd.edu email addresses for any UCSD/UCSDH employees.

Basic Information
<b>Planners and Faculty</b>
Gap and Needs
Objectives and Learning Outcomes
Financial Information
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Approval

Instructions: Click the sections of the application to review. Add comments below. Supporting files may have been uploaded and if so, are available in the File uploads area.

Approve
  Reject

Save

Disclosure Information

▼ Planner/Faculty

Email \*  First and Last Name \*

Degree \*  Profession \*

Title  Department or Affiliation

Role in Activity \*

Will this faculty/planning committee member be limited to a non-clinical (i.e., communication, leadership, ethics, etc.) subject only? \*

Yes
  No

ⓘ The disclosure field below is for use by the system and is not editable, please do not attempt to enter information into the field.

Disclosure Information

⚠ Please review your responses above to make sure all required fields (\* indicates required) are completed and there are no error messages before continuing.

[➔ Save and Continue](#)

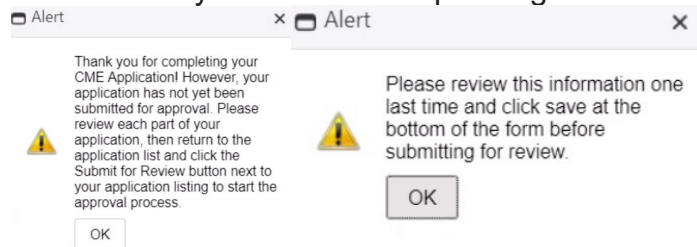
Be sure to upload the **Project Budget Template** and **Sample Import Agenda**

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Any additional notes or comments that would be pertinent during the activity review process (i.e. multi conference dates, relaying hybrid option, notes about pending speakers) can be noted in the **Comment** section



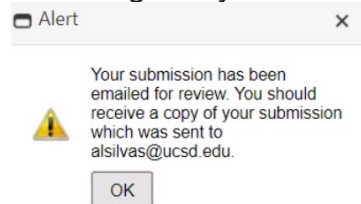
You will receive a notification indicating you have completed your CME application and that it is ready for submission pending review and submission.



**Step 4:** When you have completed the activity application and all disclosures are on file, click the **Submit For Review** button.

ActivityID	Activity Details	Author	Planners	Disclosure Status	Copy	Delete
269	<a href="#">Test Application</a> <b>Activity Type:</b> Directly Provided - Courses <b>Activity Date:</b> 2/2/2023 8:00:00 AM <b>Last Revised:</b> 11/14/2022 5:19:45 PM	Jeonathan Rodriguez Roman, MPH	Jeonathan Rodriguez Roman, MPH (Course Director), John Rodriguez, MPH (Other Planning Committee Member)	All necessary disclosures on file.	<b>Submit For Review</b>	Copy Delete

Once you have reviewed hit the **Submit For Review** you will receive a notification indicating that your submission has been emailed for review



You will receive a copy of your application emailed to you

Click here to download pictures. To help protect your privacy, Outlook prevented automatic download of some pictures in this message.



Hello Jeonathan Rodriguez Roman, MPH

The accreditation application for the following Directly Provided - Courses has been submitted for review.

Submitter: Jeonathan Rodriguez Roman, MPH (jrodriguezroman@ucsd.edu)
Title: Test Application (ID#269)
Type: Directly Provided - Courses
Start Date: 02/02/2023 08:00 AM
End Date: 02/02/2023 09:00 AM

This application is now locked and no longer available for editing. Please allow 2-3 weeks for completion of the application review process.

- If approved, you will receive an approval email and an accreditation specialist will be in contact regarding next steps.
If rejected, you will receive an email informing you of next steps.

Thank you,

Continuing Medical Education
UC San Diego
cmeaccreditation@health.ucsd.edu

Step 5: The activity application button will be greyed out until the review is complete. Activity application review times can vary. You will be contacted by email when the review is complete, when the application has been approved, if the application requires additional information, or the application has been rejected. If an application has been rejected, click on the activity name. Then, click Comments to view the peer reviewer feedback and/or make any required changes.