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Iowa Plumbing & Mechanical Systems Board

Continuing Education Information for Providers

This document provides information to continuing education providers offering courses to plumbing and mechanical systems license holders in the state of Iowa. Continuing education providers should also review Iowa Administrative Code 641—Chapter 30 for additional requirements and rules governing continuing education for plumbers and mechanical systems license holders.

- 1. For a course to be accepted for continuing education credit, both the COURSE AND INSTRUCTOR must have prior approval of the board. Approved courses must be delivered by approved instructors and vice versa. Applications for course approval should be filed at least sixty days prior to the course date. Course and instructor approval is valid for three years.
- 2. Course and instructor applications must be pre-approved by the Plumbing and Mechanical Systems Board (PMSB), the board's Continuing Education Committee, or the board's executive officer. Typically, new applications are reviewed monthly by the Continuing Education Committee.
- 3. The board hosts a training calendar on its website where licensees can search for upcoming board-approved continuing education courses. If you would like to have a course posted to the calendar, please complete the "Schedule of Courses" form.
- 4. At the conclusion of an approved continuing education course, the instructor shall inform each student that a survey of the course may be completed and submitted by the student to the PMSB office through either a written evaluation form or our online survey available on the board's website.

5.	At the conclusion of the course, each student must be issued a certificate of completion by the continuing education provider. The certificate must include the following: Full name and PMSB license number of the participant Course name and course ID# Date of course Number of CE hours awarded for code, safety, or trade discipline(s) for license renewal Instructor's full name and board-approved instructor ID# Signature of instructor (electronic signature accepted)
6.	Within 30 days of the completion of the course, the instructor or authorized person shall submit to the board either a typed or electronic course completion roster for the course. This roster must include the following: Full names and PMSB license numbers of all participants Course name and course ID # Date of course Location of course Number of program contact hours Instructor's full name and board-approved instructor ID# Signature of Instructor (electronic signature accepted)
	Postors may be submitted by small to PMSR@idph jows gov, via fay to (515) 391 6114 or via mail to the

Rosters may be submitted by email to PMSB@idph.iowa.gov, via fax to (515) 281-6114 or via mail to the PMSB office: Iowa Dept. of Public Health – PMSB; 321 E. 12th St, Des Moines, IA 50319.

- 8. Applications for renewal of courses and instructors must be submitted every three years. If the course content or instructor qualifications have changed, a new application must be submitted in lieu of renewal.
- 9. Course ID numbers and board instructor ID numbers shall not be published or provided to the public or licensee in any documents other than the completion certificate.

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10.	 □ Completed Application for Course Instructor □ Proof of instructor qualifications: □ For safety, current IOSHA card, train-the-trainer or instructor card, copy of safety-related degree or diploma □ For code, copy of any license(s), evidence of having taught courses, evidence of current certification as an inspector or plans examiner, or evidence of other equivalent specialized training or education
	☐ For trade discipline(s), copy of any license(s), evidence of employment as a product representative with manufacturer training, evidence of having taught courses, or evidence of other equivalent specialized education or training
11.	Course Applications must be accompanied by the following:
	□ Completed Application for Course Approval
	Please clearly indicate the total hours requested and the category(ies) of course content.
	☐ Course Outline: attach a copy of the course outline or syllabus which identifies the
	course content and a breakdown of student contact hours.
	tests, visual aids, or other materials that will be used in course.
	☐ Schedule of Courses: If you would like the course listed on the board's training
	calendar, include the schedule of courses form. □ Certificate of Completion: attach a copy of the proposed course certificate. You may include either your own certificate if it includes all required information or you may use
	the board's sample certificate. Course Roster: Attach a copy of the proposed course roster. You may use either your own proposed form if it includes all required information or you may use the board's sample roster.
12.	Applications for Electronic/Online Course Approval must be accompanied by the following:
	□ Completed Application for Electronic/Online Course Approval □ Course Outline: attach a copy of the course outline or syllabus which identifies the
	course content and a breakdown of student contact hours.
	material included with the course or activity.
	☐ Certificate of Completion: attach a copy of the proposed course certificate. You may include either your own certificate if it includes all required information or you may use
	the board's sample certificate. □ Course Roster: Attach a copy of the proposed course roster. You may use either your
	own proposed form if it includes all required information or you may use the board's sample roster.

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Iowa Plumbing & Mechanical Systems Board Application for Continuing Education Course Approval --- For Electronic Learning/Online Courses

Part 1. Course Information.						
Name of Course:						
Is the course open to the public? O	es O No	Cost: \$				
Would you like the course information posted to the PMSB website?						
If yes, website where participants can go to r	egister for the co	urse:				
Type of electronic training? CD-ROI specify:	M/DVD Trainin	g O Video-based Tr	aining Online Other,			
Brief summary of the training product/co	ourse:					
Part 2. Course Categories & Hours are seeking continuing education credit for. Safe you are seeking approval in multiple categories	ety courses include	Iowa Occupational Safety 8	& Health Act, First Aid, CPR, or AED. If			
○ Safety		fety Hours Requested:				
○ State of Iowa Plumbing Code	# of C	ode Hours Requested:				
○ State of Iowa Mechanical Code	# of Code Hours Requested:					
○ Trade Discipline(s):						
Plumbing		# of Hours Requested:				
○ Mechanical		# of Hours Requested:				
○ HVAC/R		# of Hours Requested:				
○ Hydronics		# of Hours Requested:				
○ Sheet Metal		# of Hours Requested:				
	TOTAL Co	urse Hours Requested:				
For Office Use Only						
,	Reviewed By:					
Approved Denied	Date Reviewed:		Processed By:			
Course Number:	Issue Date:		Expiration Date:			
Notes						
Notes:						

Part 3. Checklist of Additional Required i	mormation. (Attach to	triis application.)	
 1. Course Outline: attach course outlin of student contact hours. 	e or syllabus which ider	ntifies the course	content and a breakdown
2. Materials/ Visual Aids: provide a copy of the CD-ROM/DVD, video, visual aids or other material included with the course or activity.			
•		datas and times	
3. Schedule of Courses: include propos			
4. Certificate of Completion: attach a co	• •		
☐ 5. Course Roster: attach a copy of the p	proposed course roster.		
Part 4. Instructor & Course Sponsor In			
business or institution sponsoring the course. If a	additional instructors will b	e teaching this cou	ırse, you may attach
additional sheets as needed.	DMCD		
Name of Course	PMSB	ID #	
Instructor:	Instruct	Or ID #	
Name of Course	PMSB	ior ID #	
Instructor(s):	Instruct	Or ID #	
Name of Course	PMSB	ID #	
Instructor(s):	Instruct	or ID #	
Name of Course	PMSB	ID #	
Instructor(s):	Instruct	Or ID #	
Sponsor Business Name:			
Sponsor Contact Name, if different:			
Sponsor Contact Name, ii dinerent.			
Address One:			
Address Two:			
City:	State	Ziį	p Code:
Telephone:	Email Address:		
Who should be contacted if there are question	 ns about this application	n? () Sponsor	Instructor
Who will be responsible for monitoring attend	ance and submitting the	a course roster?) Sponsor () Instructor
will be responsible for monitoring attend	ance and Submitting the	e course roster: (
Part 5. Additional electronic/online co	urse details.		
List a minimum of three people of varying background, along	with a summary of their credent	ials, who have reviewed	I the product/course.
Reviewer #1 Name:	Credenti	ials	
	or Instru	ctor #:	
Reviewer #2 Name:	Credenti		
Day's array (IO Name)	or Instru		
Reviewer #3 Name:	Credenti or Instru		
How long did it take each person listed above to Reviewe	r Reviewer		Reviewer
complete the course? #1:	#2:		#3:
How is individual course registration tracked?	,		
What security procedures are used to verify c	ourse attendance?		
	50		
Have an acutant become treated 10 to their	waan maastaninee tii ee	2	
How are contact hours tracked? Is there a pe	rson proctoring the cou	rse'?	
M/he will trook and venerative continuing a large	otion avadit barres		
Who will track and report the continuing educ	ation credit nours?		
How will reporting be done?			

Part 6. Testing Procedures.	
Is there a test at the end of the course? Yes No	
What are testing procedures?	
Are there any time limits? Explain.	
Are there any retake limits? Explain.	
Where is the test taken and is it proctored?	
Can quizzes be taken before training is complete? Explain.	
Part 7. Attestation & Signature. Form must be signed to be con	sidered for approval.
I hereby certify that the information submitted on this application ar correct. If course approval is granted, I understand such approval i renewed to remain valid. If the course content changes, I agree to rapplication for course approval will be required.	s only valid for three years and must be
I understand that at the conclusion of the course, all lowa Plumbing receive a certificate of completion and I agree to provide the require of the conclusion of the course, I must also submit a course roster to	ed certificate. I understand that within 30 days
I hereby agree to abide by all board rules related to continuing educe 641—Chapter 30.	cation contained in Iowa Administrative Code
Printed Name:	_
Signature of Applicant:	Date:
Completed form & all required attachments should be submitted:	
VIA Email to: PMSB@idph.iowa.gov (preferred method) or	
VIA Fax to: (515) 281-6114 or	

VIA Mail to: Plumbing & Mechanical Systems Board lowa Department of Public Health 321 E 12th St Des Moines, IA 50319



Iowa Plumbing & Mechanical Systems Board Sample Certificate of Completion

Participant Information	
Full Name:	IA PMSB License #:
Course Information	
Course Name:	
Date of Course	IA PMSB Course Approval #
Instructor Information	
Instructor Name:	IA PMSB Instructor
	Approval #
Course Sponsor Information	
Sponsor Name	
Sponsor Contact Information	
Hours Awarded:	
☐ Safety (IOSHA, First Aid, CPR, etc):Hours	
State of lowa plumbing code:HoursState of lowa mechanical code:Hours	
☐ Discipline ☐ PlumbingHours ☐ MechanicalHours ☐ HVAC/RHours ☐ Sheet MetalHours ☐ HydronicsHours	
Instructor Signature:	
Date:	

Note: For course approval, please include a copy of a sample certificate with the course approval application. You may use your own format but it should include all the information listed above.

Iowa Plumbing & Mechanical Systems Board Continuing Education Course Roster



This roster must be submitted to the Plumbing & Mechanical Systems Board 30 days after the completion of the course. Submit completed forms to: PMSB@idph.iowa.gov or Fax (515) 281-6114 or mail to:

Iowa Department of Public Health Plumbing & Mechanical Systems Board 321 E 12th Street Des Moines, IA 50319

Course Name/Title:					
PMSB Course Number:		Date of 0	Course:		
Location of Course/Addre	ess:				
Code Hours:	Safety Hours:		Discipline Type:		
		1	Discipline Hours:		
Instructor Last Name:	Instructor First Na	ime:	Instructor PMSB N	lumber:	
Instructor Signature:	I				
Student Information					
Last Name	First Name	PMSB Li *Require	icense Number ed	City/State	

Course #	ŧ
Course	

Student Information				
Last Name	First Name	PMSB License Number *Required	City/State	

(Attach additional sheets as needed.)

Iowa Plumbing & Mechanical Systems Board Schedule of Courses for Training Calendar

The lowa Plumbing and Mechanical Systems Board website hosts an optional training calendar which displays upcoming board-approved continuing education courses for licensees. There is no fee associated with the posting of courses to the calendar. The training calendar may be viewed at: http://idph.iowa.gov/pmsb/training/calendar.

To post a course to the calendar, please complete one form for each approved course number. If a single course will be offered for multiple dates then one form may be used to notify of multiple dates/locations. Informational flyers, course outlines, brochures, etc may also be linked to the course announcement. If you would like a copy of the brochure posted, please email an electronic copy.

Please submit the form a minimum of 7 days and no more than one year prior to the course date.

Course Registration Contact			
Name (to be posted online):			
Т			
State:		Zip Code:	
	(to be posted online)		
	Instructor #:		
	CEUI		
	Cost:		
n:			
	State:	Contact Email Address: (to be posted online) Instructor #: CEUI Cost:	

Please email, fax, or mail completed forms to:
PLUMBING AND MECHANICAL SYSTEMS BOARD
LUCAS STATE OFFICE BUILDING
321 E. 12th STREET
DES MOINES, IOWA 50319

Email: PMSB@idph.iowa.gov or Fax 515-281-6114

Note: If submitting this form electronically, you may also attach a copy of the course registration brochure if you would like us to include that in the posting on our training calendar.

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Course Date:	Course Start Time:	Course End Time:
Course Location:		
City	State	Zip
	,	
Course Date:	Course Start Time:	Course End Time:
Course Location:	,	
City	State	Zip
Course Date:	Course Start Time:	Course End Time:
Course Location:		
City	State	Zip
Course Date:	Course Start Time:	Course End Time:
Course Location:		
City	State	Zip
Course Date:	Course Start Time:	Course End Time:
Course Location:		
City	State	Zip
Course Date:	Course Start Time:	Course End Time:
Course Location:		
City	State	Zip

If additional dates are available please copy this page as needed.

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Iowa Plumbing & Mechanical Systems Board

Continuing Education Guidelines for Licensees

Iowa law requires members of every licensed or regulated profession to obtain continuing education as a condition of license renewal. (See Iowa Code chapter 272C and Iowa Code section 105.20) For each plumbing and mechanical systems board license, the basic requirement is at least 8 hours of classroom instruction during each three-year licensing renewal period. For a course to be valid for continuing education, both the instructor and the course must be pre-approved by the board. Please see the information below for additional details concerning continuing education requirements.

Hours Required

Single License – Plumbing, HVAC/R, Hydronics, Sheet Metal, or Mechanical	2 hours safety (Iowa Occupational Health & Safety) 2 hours code (applicable plumbing or mechanical code) 4 hours discipline (must be in current license discipline only) 8 TOTAL HOURS
Multiple Mechanical Licenses – Combination of 2 or more licenses in mechanical trades (HVAC/R, sheet metal, & hydronic systems)	4 hours safety (Iowa Occupational Health & Safety) 2 hours mechanical code 8 hours discipline (from one or any combination of discipline licenses held) 14 TOTAL HOURS
Multiple Licenses - Plumbing & Mechanical Combination of 1 plumbing license and 1 or more mechanical licenses	4 hours safety (Iowa Occupational Health & Safety) 2 hours mechanical code 2 hours plumbing code 8 hours discipline (from one or any combination of discipline licenses held) 16 TOTAL HOURS

Online Courses

Up to half of the total hours required can be completed through online activities that have been prior-approved by the board. The maximum number of hours required for each renewal is 16.

Mechanical & Specialty Licenses

- Mechanical trades includes HVAC/refrigeration, sheet metal, and hydronic systems;
- Disconnect/reconnect specialty licensees follow requirements for plumbing license;
- Hearth Systems specialty licensees follow requirements for mechanical license;
- Service Tech HVAC specialty licensees follow requirements for mechanical license;
- Private school or college maintenance specialty licensees Considered a sublicense of whatever discipline(s) in which the licensee actually practices.

No continuing education hours are required for apprentice licenses or medical gas piping certification. Persons with a medical gas certification must ensure they maintain current certification and must maintain brazer qualification.

Exemptions & Extensions

A licensee shall be exempt from the continuing education requirements for the following reasons:

- For the first renewal of a person who was licensed as an apprentice in Iowa and successfully passed the examination and became licensed as a journeyperson in Iowa;
- For periods the licensee served honorably on active duty in the military;
- For periods the licensee resided in another state or district having continuing education requirements for the discipline and the licensee met all requirements of that state or district;
- For periods the licensee was a government employee working in the licensee's specialty and assigned to duty outside the United States; and
- For periods the licensee was absent from the state but engaged in active practice under circumstances approved by the board.

Licensees may also apply for a permissive full or partial exemption for individual cases of exceptional hardship or extenuating circumstances, such as a physical or mental disability or illness. Documentation is required and additional conditions may be imposed. Board rules state that permissive exemptions shall only be granted in the most exceptional and extraordinary of circumstances.

The board may also, in individual cases involving hardship or extenuating circumstances, grant an extension of time within which to fulfill the minimum continuing education requirements. There must be documented circumstances beyond the control of the licensee which prevent attendance at required activities. All requests must be made **prior** to the license expiration date.

Reporting Continuing Education

Continuing education is reported at the time of license renewal. The renewal application requires licensees to enter the board-approved course number, course name, and course date for all classes. You must also indicate the course topic (e.g. safety, code, HVAC, etc.) and the number of hours awarded. This information can be found on the certificate of attendance that was provided to you at the end of each course. It is very important that you maintain a file of all continuing education courses attended. The board does not maintain individual files for every licensee listing the courses you took. While instructors do submit rosters to our office, these rosters are used to audit and verify attendance for courses and hours self-reported by you at the time of license renewal. If you lose copies of your proof of attendance certifications, you should contact the course sponsor/instructor.

Finding Courses

Visit the "Training" link on our website to find a list of upcoming courses and a link to approved online courses. Be advised that not all instructors or course sponsors choose to list their courses on our training calendar, so other courses may be available in your area. You should contact your closest community college, trade union or association, or other local instructor to find out if other courses may be available. You will need to contact the course sponsor for information on course registration, meeting times and locations, obtaining proof of attendance, and the number of hours awarded.