

Joe Lombardo, Governor



**NEVADA STATE BOARD OF ORIENTAL MEDICINE
APPLICATION FOR CREDIT APPROVAL OF CONTINUING EDUCATION
Pursuant to NAC 634A.137**

- Please note that if your CEU course has been approved by NCCAOM as a core competency with the designation of AOM-ABT, AOM-AC, AOM-BIO, AOM-CH, AOM-GM, AOM-SA, and/or AOM-ET, then it will be automatically deemed approved and you do not have to submit this form. You need to submit the CEU certificate dated in the current renewal period or else no credit will be given; no credit will be given for retroactive or out-dated CEUs.
- One application per course must be submitted for review and approval.
- The fee required pursuant to NAC 634A.165 of \$100 (per course), payable through your Certemy account.
- The Board requires a syllabus, a curriculum vitae for the instructor(s), and the NCCAOM course approval # and category # if applicable.
- If the Board approves a course of continuing education pursuant to NAC 634A.137, the Board will determine the number of hours of continuing education that a licensee may receive for attending the course.
- Please upload this Form into your Certemy account and email us once it is uploaded. Our email address is omboardexecutivedirector@gmail.com

1. Name of Applicant or Entity: Nevada Oriental Medicine Association
2. Address: 8113 Moonstone Circle, Las Vegas, NV, 89128
3. Phone number: 725-275-1800
4. Email: TiferesMedical@gmail.com
5. Location and Address of the continuing education program: Zoom

6. Course approved by: NCCAOM yes _____ no ✓

Other entity/entities: _____

7. Title of Course: NOMA Acupuncture Continue Education 2025
8. Date(s) and times of the course taken: 10/19/2025
9. Name of Instructor(s) and his/her degree(s): Ken Cherman, L.Ac.

10. CEU hours: 10

11. Did you attend in person or online: Online CEU Scheduled for 10/19/25

I swear that the above statement is nothing but true.

Signature of the Applicant or Representative of Entity: _____

Name: HONG ZHENG

Date: 8/27/25