



APPLICATION TO RENEW

Dear Applicant,

In 1994, a coalition of victim service providers representing numerous statewide advocacy organizations formed the Ohio Advocate Network (OAN). This group recognized the need to publicly affirm the field of victim advocacy, establish professional standards, and encourage specialized continuing education training. Acquiring and maintaining the OAN Registered Advocate credential attests that an individual has achieved a defined level of experience serving victims of crime, has acknowledged the importance of adhering to ethical standards of practice, and has demonstrated a commitment to expand knowledge and improve professional skills through training.

OAN remains dedicated to professionalizing the field of victim advocacy and maintaining a best-practice approach for credentialing. On occasion it is necessary to update OAN policy and procedure. All updates are crafted with a continuing commitment to offer a credentialing process which is achievable, affordable, and meaningful. The Application packets have been revised to reflect updates which are effective beginning December 2020. The OAN Review Committee will only accept the revised applications for review. Applications are accepted twice per year, and must be received between June 1-30 and December 1-31. Please note the current mailing address for submitting OAN applications, and be aware the Application fees are non-refundable.

Please thoroughly review all information in this packet, and carefully read both the Instructions and the Application for RENEWING your Registered Advocate status before completing the required documents. All OAN forms and supporting documents may be downloaded from the Ohio Victim Witness Association website at www.ovwa.org. If you have questions about the OAN application requirements or the registration process, and would like technical assistance, you may submit your questions by email to tlajeunesse@co.greene.oh.us, or call (937) 562-5087.

Thank you for your interest in renewing your Registered Advocate credential with the Ohio Advocate Network and for joining the many victim advocates and allied professionals in Ohio committed to professionalization of our field.

Respectfully,

The Ohio Advocate Network Review Committee



RENEWAL APPLICATION INFORMATION

REGISTERED ADVOCATE ELIGIBILITY REQUIREMENTS

OAN Registered Advocates, at all levels, must RENEW their registration credential every two years. Renewal is accomplished by submitting a completed Registered Advocate Renewal Application and the required application fee.

Registered Advocates who have retired, or who are not currently employed as a victim advocate or allied professional, may still maintain and renew their OAN registration credential as long as they complete the required continuing education training and meet all requirements to remain in good standing.

REACTIVATION OF REGISTERED ADVOCATE STATUS

If an OAN registration credential has lapsed by more than four years since the last approval date, the applicant must request reactivation of their RA status and pay a \$20.00 Reactivation Fee. A Registered Advocate who is seeking to reactivate and renew their RA status must complete 24 hours of required continuing education training within the four year period immediately preceding submission of the Registered Advocate Renewal Application.

REGISTERED ADVOCATE LEVELS

Registered Advocate (RA) – An applicant at the RA level has accumulated a minimum of 1,950 hours of professional work or volunteer experience providing direct services to crime victims.

Registered Advocate with Advanced Standing (RAAS) – An applicant at the RAAS level has accumulated a minimum of 7,800 hours of professional work or volunteer experience providing direct services to crime victims.

Registered Advocate with Senior Standing (RASS) – An applicant at the RASS level has accumulated a minimum of 11,700 hours of professional work or volunteer experience providing direct services to crime victims.

CONTINUING EDUCATION TRAINING

To maintain your Registered Advocate status, a minimum of 24 hours of continuing education training must be completed during every two-year registration cycle. To qualify, training must be completed within the two year period immediately preceding the application submission. As an example, the continuing education training for an applicant who is Renewing in December 2020 must have been completed between January 2019 and December 2020.

The approved continuing education training topics are listed in the OAN Training Area Guidelines (TAG) List Series B. Renewing applicants are also permitted to complete continuing education training from the TAG List Series A topics, as these topics may routinely be updated and/or expanded. While some amount of training may be completed via an electronic platform (such as a webinar or online learning module), at least 18 hours of the required 24 hours of continuing education training must be completed at in-person training events.

Renewal applicants must document their continuing education training in section 2 of the application. It is not required for renewing applicants to submit certificates of completion (though they should be retained for record keeping). The OAN Review Committee understands that a Registered Advocate may have completed continuing education training well in excess of the 24-hour minimum requirement, however it is not necessary to list every training event attended. Please list sufficient information to demonstrate adequate compliance with all continuing education training requirements.



RENEWAL APPLICATION INSTRUCTIONS

SECTION 1: APPLICANT INFORMATION

- Download and print the RENEWAL application from the OAN page of the Ohio Victim Witness Association website at www.ovwa.org. DO NOT use an older copy of the application form, as it will not be accepted.
- Type, or print CLEARLY and LEGIBLY in ink.
- Select your current registered advocate level.
- Provide your Registered Advocate (RA) number, which is located on your renewal card and/or OAN certificate.
EXAMPLE: RA – 06 – 94 – 0034
You do not need to include an identifier for your discipline (MUL/SAS/DOV/HOM)
- Provide all requested personal information and current agency information.
- Select a preference for how you would like to receive correspondence sent by postal mail.
- Indicate if there have been any changes to your personal/agency information since your last application.

SECTION 2: DOCUMENT CONTINUING EDUCATION TRAINING

- Refer to the Training Area Guidelines (TAG) List Series B for approved training topics.
- Training should be completed in both the General and Specific topic categories from Series B of the TAG List with an emphasis on training topics for your specified discipline.
- List each completed training event, and include the training date(s), topic/title, sponsor/location, whether the training was completed in-person (IP) or electronically (E), and number of hours approved for each individual event.
- You are NOT required to submit documentation to verify attendance. However, you should retain all documentation and certificates for future reference. If your application is selected for a training audit, you will be required to provide proof of attendance at the training events listed in your Renewal application.

SECTION 3: CODE OF ETHICS

- All Registered Advocates are expected to maintain an ethical standard of practice that ensures quality service delivery and professionalism. OAN has adopted the National Organization for Victim Assistance (NOVA) Code of Ethics, and it is a required component of the Application to Renew the Registered Advocate Credential.
- Read, sign, and date the Code of Ethics to acknowledge a continuing commitment to these standards.

SECTION 4: CERTIFICATIONS

- Carefully read and initial each separate Certification.
- Sign and Date the application.



RENEWAL APPLICATION INSTRUCTIONS

REQUIRED RENEWAL APPLICATION FEE

- The Renewal Application Fee is \$20.00, and is NON-REFUNDABLE.
- PERSONAL CHECKS ARE NOT ACCEPTED, and OAN does not accept electronic or credit card payments.
- ONLY money orders, organizational checks, or certified checks are accepted as forms of payment, made payable to the OHIO ADVOCATE NETWORK.
- If you are required to Reactivate your registration status, you must submit an additional \$20.00 Reactivation Fee.
- Upon approval of your application you will receive a Renewal Card.
- You may request a replacement certificate for an additional fee of \$15.00.

MAIL THE APPLICATION PACKET

- Ensure you have the included following:
 - Completed Application, and all supporting documents
 - \$20.00 Renewal Application Fee
 - Reactivation fee of \$20.00, if applicable
- Retain a copy of the completed application for your records.
- Mail the completed application and fees to:
Ohio Advocate Network
c/o Greene County Prosecutor's Office
61 Greene Street, Suite 200
Xenia OH 45385

GENERAL INFORMATION

- The Registered Advocate status will expire two years from the date of approval and must be renewed.
- Applications are ONLY accepted during the months of June and December.
- Please notify OAN, in writing, of any changes to your name, address, email, or agency.



APPLICATION TO RENEW REGISTERED ADVOCATE CREDENTIAL

PLEASE TYPE OR PRINT CLEARLY IN INK

SECTION 1: APPLICANT INFORMATION

CURRENT REGISTERED ADVOCATE STATUS:

Registered Advocate Registered Advocate Advanced Standing Registered Advocate Senior Standing

REGISTERED ADVOCATE NUMBER: RA - _____ - _____ - _____

APPLICANT NAME _____

HOME ADDRESS _____

CITY _____ COUNTY _____ ZIP _____

PHONE (HOME) _____ (CELL) _____

PHONE (WORK) _____ (FAX) _____

PREFERRED E-MAIL ADDRESS _____

AGENCY/ORGANIZATION _____

AGENCY ADDRESS _____

CITY _____ COUNTY _____ ZIP _____

CURRENT POSITION _____

Please send all USPS correspondence to my Home address Work address

Has any of the information noted above changed since your last RENEWAL? No Yes: _____

SECTION 2: CONTINUING EDUCATION TRAINING (24 hours required)

DATE	TOPIC	SPONSOR / LOCATION	IP / E	HOURS
TOTAL HOURS OF TRAINING COMPLETED				

If necessary, please attach an additional page to document continuing education training events

SECTION 3: CODE OF ETHICS

National Organization for Victim Assistance

Adopted by the NOVA Board of Directors, April 22, 1995

CODE of PROFESSIONAL ETHICS for VICTIM ASSISTANCE PROVIDERS

Victims of crime and the criminal justice system expect every Victim Assistance Provider, paid or volunteer to act with integrity, to treat all victims and survivors of crime—their clients—with dignity and compassion, and to uphold principles of justice for accused and accuser alike. To these ends, this Code will govern the conduct of Victim Assistance Providers:

I. In relationships with every client, the Victim Assistance Provider shall:

1. Recognize the interests of the client as a primary responsibility.
2. Respect and protect the client's civil and legal rights.
3. Respect the client's rights to privacy and confidentiality, subject only to laws or regulations requiring disclosure of information to appropriate other sources.
4. Respond compassionately to each client with personalized services.
5. Accept the client's statement of events as it is told, withholding opinion or judgment, whether or not a suspected offender has been identified, arrested, convicted, or acquitted.
6. Provide services to every client without attributing blame, no matter what the client's conduct was at the time of the victimization or at another stage of the client's life.
7. Foster maximum self-determination on the part of the client.
8. Serve as a victim advocate when requested and, in that capacity, act on behalf of the client's stated needs without regard to personal convictions and within the rules of the advocate's host agency.
9. Should one client's needs conflict with another's, act with regard to one client only after promptly referring the other to another qualified Victim Assistance Provider.
10. Observe the ethical imperative to have no sexual relations with clients, current or past, in recognition that to do so risks exploitation of the knowledge and trust derived from the professional relationship.
11. Make client referrals to other resources or services only in the client's best interest, avoiding any conflict of interest in the process.
12. Provide opportunities for colleague Victim Assistance Providers to seek appropriate services when traumatized by a criminal event or a client.

II. In relationships with colleagues, other professionals, and the public, the Victim Assistance Provider shall:

1. Conduct relationships with colleagues in such a way as to promote mutual respect, public respect, and improvement of service.
2. Make statements that are critical of colleagues only if they are verifiable and constructive in purpose.
3. Conduct relationships with allied professionals such that they are given equal respect and dignity as professionals in the victim assistance field.
4. Take steps to quell negative, insubstantial rumors about colleagues and allied professionals.
5. Share knowledge and encourage proficiency and excellence in victim assistance among colleagues and allied professionals, paid and volunteer.
6. Provide professional support, guidance, and assistance to Victim Assistance Providers who are new to the field in order to promote consistent quality and professionalism in victim assistance.
7. Seek to ensure that volunteers in victim assistance have access to the training, supervision, resources, and support required in their efforts to assist clients.
8. Act to promote crime and violence prevention as a public service and an adjunct to victim assistance.
9. Respect laws of one's state and country while working to change those that may be unjust or discriminatory.

III. In her or his professional conduct, the Victim Assistance Provider shall:

1. Maintain high personal and professional standards in the capacity of a service provider and advocate for clients.
2. Seek and maintain a proficiency in the delivery of services to clients.
3. Not discriminate against any victim, employee, colleague, allied professional, or member of the public on the basis of age, gender, disability, ethnicity, race, national origin, religious belief, or sexual orientation.
4. Not reveal the name or other identifying information about a client to the public without clear permission or legal requirements to do so.
5. Clearly distinguish in public statements representing one's personal views from positions adopted by organizations for which she or he works or is a member.
6. Not use her or his official position to secure gifts, monetary rewards, or special privileges or advantages.
7. Report to competent authorities the conduct of any colleague or allied professional that constitutes mistreatment of a client or that brings the profession into disrepute.
8. Report to competent authorities any conflict of interest that prevents oneself or a colleague from being able to provide competent services to a client, or to work cooperatively with colleagues or allied professionals, or to be impartial in the treatment of any client.

IV. In her or his responsibility to any other profession, the Victim Assistance Provider will be bound by the ethical standards of the allied profession of which she or he is a member.

I, the undersigned applicant, hereby certify that I have read and agree to follow the Code of Professional Ethics for Victim Assistance Providers.

Printed Applicant Name: _____

Signature of Applicant: _____ Date: _____

SECTION 4: CERTIFICATIONS - READ AND INITIAL EACH OF THE FOLLOWING

- _____ I, the undersigned applicant, certify that the information and supporting documentation submitted in this application is true and accurate.
- _____ I, the undersigned applicant, certify that I have never been convicted of any crime stemming from an act of violence or threat thereof, any felony, or any criminal act involving a child.
- _____ I, the undersigned applicant, certify that I have read and agree to abide by the National Organization for Victim Assistance (NOVA) Code of Professional Ethics.
- _____ I, the undersigned applicant, certify that I have never been investigated, disciplined, suspended and/or terminated from either a volunteer position or a paid position for conduct in violation of the NOVA Code of Professional Ethics.
- _____ I, the undersigned applicant, authorize the OAN Review Committee to verify my paid employment, volunteer work experience, and/or ethical conduct with any of the organizations I have listed in this application.
- _____ I, the undersigned applicant, certify that I have read and agree to the nonrefundable payment terms for OAN Registration fees.
- _____ I, the undersigned applicant, certify that I have read and understand the OAN Disclaimer.

I affirm the Certifications initialed above are true and correct, and that falsification of any portion of the application or the supporting documents will result in a denial or termination of the Ohio Advocate Network Registered Advocate Credential. I understand approval of this Application is contingent upon the satisfactory review and verification of all components. If approved, I agree to abide by all OAN policy and procedure for maintaining the Registered Advocate Credential.

Applicant Signature: _____ Date: _____

OHIO ADVOCATE NETWORK DISCLAIMER FOR ALL RA LEVELS

As a voluntary state-wide credentialing body for victim advocates and allied professionals in Ohio, **OAN** is committed to affirm that applicants meet the minimum stated standards for direct service experience, as well as required pre-registration training and continuing education training, to attain and maintain Registered Advocate status. **OAN** diligently seeks to ensure that applicants for Registration offer a good-faith representation of their acquired direct service experience and training, through the registration application questionnaire and required supporting documentation. **OAN** has no educational, legal, statutory, regulatory or investigative authority to guarantee applicants approved for registration are qualified and/or competent to provide direct services to crime victims. **OAN** cannot assure the complete accuracy of all information submitted by individual applicants. **OAN** reserves the right to modify organizational policy and procedure, application documents, registration requirements, and/or application fees at any time and without notice. **OAN** has the authority to review, suspend, and/or permanently revoke any Registration based upon alleged, confirmed and/or acknowledged violations of the NOVA Code of Professional Ethics.

1. SUBMIT THE COMPLETED APPLICATION TO RENEW OAN REGISTRATION TO:

The Ohio Advocate Network
c/o Greene County Prosecutor's Office
61 Greene Street, Suite 200
Xenia OH 45385

2. RETAIN A COPY OF THE COMPLETE APPLICATION FOR YOUR RECORDS.

3. ENCLOSE PAYMENT – A nonrefundable fee of \$20.00 is required for all Renewal Applications. The Reactivation fee, if applicable, is \$20.00. *Payment will only be accepted in the form of an Agency Check, Money Order, or Certified Check, made payable to Ohio Advocate Network.*

4. YOUR OAN REGISTRATION MUST BE RENEWED EVERY TWO YEARS - Registration expires two years from the date of approval. Applications are accepted only during the months of June and December. You *may* receive an email reminder prior to your renewal month, however it is your responsibility to maintain this credential.

5. Please notify OAN of any change in your name, postal address, email address, or agency.