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| **REQUEST FORM FOR CEU APPROVAL** |
| If you attended continuing education that did not issue CEU credit, complete the following form and submit to the Continuing Education Coordinator. Attach a copy of the program brochure/agenda and/or your record of attendance and mail it to:Wendy J. Gabrielson, Continuing Education CoordinatorOffice of Library Development Oklahoma Department of Libraries 200 N.E. 18th St.Oklahoma City, OK 73105-3298**OR Email** request form and agenda/record of attendance to: wendy.gabrielson@libraries.ok.gov **OR Fax** request form and agenda with your name and library to:**405-522-3326*** A confirmation showing the number of CEUs awarded will be emailed to you.
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| Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First MI Last Library Name/Address:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Learning Activity Description (use additional pages if necessary)Name of program/conference: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Dates: \_ Sponsored by: Location of program/conference: Please list, by title or a short description, each class or program attended with the actual time spent in each class **OR** provide an agenda with breakdown of time spent.  Title or Short Description Start of Class Time Class Ended |

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|  How does this program relate to your current/future job responsibilities? |
| I hereby certify that the above information is true and correct to the best of my knowledge. I understand that any false statements may result in denial or revocation of the certification. Applicant Signature Date signed |
| TO THE APPLICANT: Confirmation Certificate should be saved. Send a copy of confirmation with the Certification Renewal Form when renewing your certificate. |