



Office of Continuing Education

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NON-AFFILIATE CEU EVENTS APPROVAL APPLICATION

Please complete and submit this form for the planned event.

SUBMIT NO LATER THAN 4 WEEKS PRIOR TO THE EVENT TO ALLOW FOR APPROVAL PROCESS.

Name of Organization _____ CEUs Requested _____

Contact Person _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____ Date of Event _____

The following information must accompany this application. Please use a separate form for each lecture.

1. TITLE of the lecture _____

2. NAME of speaker _____ ; LENGTH of lecture (1 hour minimum) _____

3. A ONE PARAGRAPH SYNOPSIS or OUTLINE of lecture _____

4. LEARNING OUTCOMES as stated by the presenter (behavioral or performance objectives: the purpose is to specify the skills, knowledge or attitudes that attendee should be able to demonstrate following the lecture.)

5. CURRICULUM VITAE (Qualification) or RESUME of presenter _____

Speaker contact information _____

6. Please include the SCHEDULE OF EVENTS for more than one presenter

Mail or email to: Vickie C. Widmyer, CPE • OCE Director, CERC Chairman
718 Summitview Avenue, Yakima, WA 98902; cercaea@electrology.com

Please notify by cell phone when you are sending via Email. Cell (509) 961- 0435

THIS APPLICATION MUST BE APPROVED PRIOR TO PUBLISHING CEU VALUE FOR AN EVENT.
TO EXPEDITE THE APPROVAL, ENSURE ALL REQUESTED INFORMATION IS PROVIDED.

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