

## CEU Form #2 – Submitted Only by Course Provider

*(Must use email on file)*

- Only include the names of the people who are requesting CEUs be added to their transcript.
- CEUs are only added if a person has taken an initial training course.

Course #:		Start date:		End date:	
Course Complete Name <i>(no abbreviations)</i>					
Course Provider					
Instructor					

All of these attendees are from this location

Facility Name					
Mailing Address					
Supervisor		Update notice sent to this person at this email address for all the people listed below. (Transcript Updates are no longer mailed.)			
Supervisor's Email					

	First Name	Last Name	Email <i>(if they would like a copy of their update notice)</i>
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			

Update notices are sent within 7 days of receiving this form.

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