

**Plymouth State University**  
*Frost School* of Continuing and Professional Studies  
Student CEU Request Form

Title of Educational program/event: \_\_\_\_\_

Date(s) of program/event: \_\_\_\_\_

Location of program/event: \_\_\_\_\_

Number of hours involved in the program/event: \_\_\_\_\_

**Please complete the following information and submit with your payment of \$10.00. You will be sent a CEU certificate stating the conference/course name and the number of CEU units awarded for your participation in this conference/course.**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Phone No. \_\_\_\_\_

Number of actual contact hours (direct instructional time) \_\_\_\_\_

Instructor Signature \_\_\_\_\_

Number of CEUs expected: \_\_\_\_\_

Note: 10 instructional hours = 1 CEU

CEU registration payment attached

Please make checks payable to Plymouth State University and return to:

*Frost School* of Continuing and Professional Studies  
MSC #10, 17 High St.  
Plymouth State University  
Plymouth, NH 03264

For any questions please call (603) 535-2228 or e-mail: [gailc@mail.plymouth.edu](mailto:gailc@mail.plymouth.edu)