



### Student CEU Request Form

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

Date 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 \$15.00. You will be sent a CEU certificate stating the conference/ workshop name and the number of CEU units awarded for your participation in this conference/workshop.

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Instructor's Name/Title \_\_\_\_\_

Instructor's Signature \_\_\_\_\_ Date \_\_\_\_\_

*(in lieu of instructor's signature, attached signed certificate of completion)*

Number of actual hours of instruction \_\_\_\_\_ Number of CEUs expected \_\_\_\_\_

*Note: 10 instructional hours = 1 CEU*

Please make checks payable to **Plymouth State University**. Return this form, a copy of your certificate of completion, and check to:

Plymouth State University  
Registrar's Office  
Attn: CEU  
17 High Street, MSC #7  
Plymouth NH 03264

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Processed by: \_\_\_\_\_ Date \_\_\_\_\_ 6/2018