



Request for Continuing Professional Development (CPD) Credits



Please complete one request form for each activity for which you would like to receive CPD credits.

Include a copy of all materials that describe the activity (publications, presentation, brochures, etc.) with your request.

Date of Request:	
Name:	
Address:	
Phone:	Fax:
E-mail Address:	
Activity Title:	
Activity Description:	
Date(s) and Location (if applicable):	
Instructor/Presenter's Name & Contact Information (if applicable):	
How many hours of activity, <u>not counting</u> breaks, meals, or introductions:	

If the activity was a meeting, training, conference, workshop, presentation, etc. implemented and/or delivered by someone other than you, please complete the following evaluation:

Please indicate the extent to which you agree or disagree with the following statements:

	Strongly Disagree 1	2	3	4	5	Strongly Agree 6
<i>About the CPD Activity</i>						
A. The content was organized clearly and logically.						
B. The technical content was appropriate.						
C. My knowledge on the topic increased by participating in the activity.						
D. The activity held my attention.						
E. The length of the activity was about right.						