



## **CERTIFICATION OF CONTINUING EDUCATION (CE) COURSEWORK**

I, \_\_\_\_\_, certify that I have completed the required hours of approved CE  
*Name*

Coursework for the calendar year(s) \_\_\_\_\_.

Applicants shall complete four hours of CE coursework per calendar year, shall maintain records of completed CE coursework for a period of four years from the date of completion, and shall provide such records to the regulatory agency upon request.

I hereby make application for license to be issued in accordance with the terms and provisions of the Rules and Regulations of the \_\_\_\_\_.  
*Licensing Agency*

I certify under penalty of perjury that the statements and answers I have made in this application are true and correct.

\_\_\_\_\_  
*Date*                      *Signature*

### **Coursework completed (Date/Title/# of CE Hours):**

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_