CERTIFICATION STEERING COMMITTEE WORKSHOP PRESENTER DOCUMENTATION FORM

NAME:	DATE:
DATE OF PRESENTATION:	
PREPARATION HOURS: a. Organizing information for the b. Preparing handouts:	presentation:
TOTAL RECERTIFICATION HOURS R	REQUESTED, BY AND FOR THE ATION COMMITTEE:
workshop. You may NOT request hours to	number of hours spent in preparation for the for the actual workshop presentation time. and in preparation. Please submit this form to
Approved by the Certification Committee for	
(signature)	Certification Steering Committee Chair.