

**Certification Examining Board of LASACT
(LASACT CEB)**

SUMMARY OF CONTINUING EDUCATION FOR CCDP/CCDP-D RENEWAL

Name: _____

Dates to be covered 10/3/09 to 10/3/2010

Continuing Education Requirement: 20 hours in integrated services / co-occurring disorders / dual diagnosis between the dates of 10/3/2009 and 10/3/2010.

Date	Provider	Title	# Hours
		Total Hours	

Make extra copies as needed.

Instructions:

- ✓ Enter only one educational event per row.
- ✓ Provide the information requested in each column for each educational event.
- ✓ Number of hours must total a minimum of 20 for the period 10/3/2009 to 10/3/2010
- ✓ Attach a copy of a certificate for each educational event listed. Certificates must show the provider, date(s), title of event, speaker/presenter, number of contact hours completed, and your name. Certificates without this information will be rejected. Title of educational event must indicate clearly that it is related to integrated services and/or co-occurring disorders.
- ✓ If college or university credit was given, hours are determined at the rate of 15 clock hours per semester credit hour.

THIS FORM MUST BE COMPLETED. SIMPLY SAYING "CERTIFICATES ATTACHED" IS NOT ACCEPTABLE