



Activity Report Form

Certification Maintenance Program (CMP)

Associate Continuing Education Tracking (ACET) Program

Please print all information below. An illegible or incomplete form will result in delayed processing.

Activity Number									
Sponsor Code				Month	Year	Number			
0	1	1	3						

Date(s) of Activity: _____

Name of RID Approved Sponsor: _____ UTRID 0113

Activity Title: _____

Number of CEUs: _____ Activity Content(Check One): PS GS

Instructor Name: _____
First time presenting this workshop -- please award General Studies
CEUs: →

Instructor RID Member #				

Activity Attendees:

RID Member #	Participant Name	City	State

