

Request for CEU recognition

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Please use one sheet	per event or r	per day for	events over	multiple day	/S

Member Name	Me	ember No		
Event Name		Date		
Speaker name				
Topic				
Start time			Minutes	
Finish time				
Speaker name				
Topic				
Start time			Minutes	
Finish time				
Speaker name				
Topic				
Start time			Minutes	
Finish time				
Speaker name				
Topic				
Start time			Minutes	
Finish time				
Speaker name				
Topic				
Start time			Minutes	
Finish time				
Total education minutes (do not include breaks or non-teaching time)				
I declare that I have participated in the above education sessions for the duration of time declared. I understand that making a false declaration will invalidate my Registered Membership.				
Signature		Date		
Where possib	le, provide details of someone who was at the event and can ve	erify your a	ttendance.	
Name	Phone #			