

Certified Crop Adviser CEU Application Form



CONTACT INFORMATION

Name:

Phone #:

Fax #:

E-mail:

Street:

City:

State:

Zip:

MEETING INFORMATION

Sponsors:

Meeting title:

Open to public: yes no

Fee:

Is this a previously approved meeting? yes no

If yes, provide tracking number and date held:

MEETING Location (Hotel name, convention ctr., etc.)	Address	City/State & Zip	Date(s)	Time(s)

CEUs Requested:	Nutrient Mgmt:	Integrated Pest Mgmt:	Professional Development:
	Soil & Water Mgmt:	Crop Mgmt:	Total CEUs:

Note: When filling in the Continuing Education Unit (CEU) area column, please match to the best area as found in the CEU Standards booklet. CEU sessions should cover new concepts, recent research results or other science that relates to the standards or goes beyond them. For best reviews, attach as much conference information and presentation details to each submission, i.e., submission of handouts and presentations are encouraged. NOTE CEU AREA EXAMPLE: NM1a – NM = Educational Area Nutrient Management, 1 = Subject Matter Area Soil Fertility and a = Area of Expertise Soil Sampling Procedures.

Program Information: Please complete the remainder of this form matching your topics being presented with the CCA Continuing Education Standards booklet. **To convert minutes to CEUs, please see the CEU conversion table in the instruction packet.**

Date	Session Time	CEU Area	CEUs	Session Title	Session Summary (or attach)	Speaker name and background (or attach)
	Start					
	End					
	Start					
	End					
	Start					
	End					
	Start					
	End					

Date	Session Time	CEU Area	CEUs	Session Title	Session Summary (or attach)	Speaker name and background (or attach)
	Start					
	End					
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	End					

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	Start					
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