Applying and Receiving CEUs at Seattle University

Dear Candidate for Seattle University CEUs,

Thank you for successfully completing the Seattle University and Washington State approved professional learning opportunity. To receive your Post BA credits, you must complete the following steps within two weeks of course completion (last course date).

- After you have successfully completed the course, make the CEU payment within two weeks through the Catalog link shared with the course instructor.
- After filling out your CEU form legibly & making your payment online, email
 professionallearning@seattleu.edu a scanned copy or your form (photo will work, but please make sure the image is clear).
- 3. Once your email with the CEU form is received, SU will verify your attendance and payment. SU will sign the form and email you back with a signed copy of your form.

COLLEGE OF

EDUCATION

SEATTLE UNIVERSITY – COLLEGE OF EDUCATION

Professional & Continuing Education

901 12th Ave, P.O. Box 222000 Seattle, WA 98122-1090 (206) 296-2147 Fax (206) 220-8235 https://www.seattleu.edu/education/professional-development professionallearning@seattleu.edu

Continuing Education Unit Record CEU REGISTRATION

Use this form to verify your attendance at an approved continuing education unit offering outlined in Section II below. This form must be retained by the individual as verification of attendance. It is the individual's responsibility to maintain accurate records for compliance with certification regulations.

DO NOT USE THIS FORM IF YOU ARE RECEIVING COLLEGE CREDIT OF CLOCK HOURS FOR THIS APPROVED CEU PROGRAM.

PLEASE PRINT AND USE BLUE or BLACK PEN ONLY.

SECTION I – PARTICIPANT INFORMATION				
Legal Name (Last, First, Middle)	Maiden or Former N	łame		
Home Address (Street, City, State, Zip Code)	Telephone Number	Telephone Number		
E-mail Address				
ECTION II – CEU APPROVED OFFERING				
TITLE OF CEU OFFERING				
TOTAL NUMBER OF CEUS AVAILABLE FOR OFFERING FIR	RST DAY OF OFFERING	LAST DAY OF OFFERING		
ECTION IV – PARTICIPANT AFFIDAVIT I, affirm that I earned (number of hour for attendance at the above-mentioned approved program. Lam not seeking the seeking approved program.	urs)			
for attendance at the above-mentioned approved program. I am not seeking college credit or clock hours for this program. I, declare that the information provided on herein on this form is correct to my best knowledge.				
Original Signature of Participant	Date			
SECTION V – VERIFICATION by CEU PROVIDER				
When signed by the approved CEU provider, this form serves as a transcrip	t documenting eligible	CEUs earned.		
Julie Kang, Ph.D., NCBT, Seattle University	_	Date		

SECTION III – SELF REPORTING (cont.)

Complete section in full and total the amount of hours at bottom. After the minimum 10 learning hours (\$40), CEUs are given in increments of .5 units (5 hours for \$20). 10 hours = 1 CEU, 5 hours = .5 CEU

Date	Time/Session #	Presenter	Length of Session
	1	Total hours attended:	