CONTINUING EDUCATION SIGN-IN SHEET

Course Title _____ Date _____

Person in Charge _____ Phone ( )_____

Course Location _____
(City) (State)

IDENTIFICATION CODE

_____-_____-_____

		HOURS
Laws	(L)	_____
Ground	(G)	_____
Aerial	(A)	_____
Other	(O)	_____
Total		_____

Hours column to be left blank unless attendee's hours are less than the accredited hours approved. ⇢

SIGNATURE	PRINT NAME	DPR License/Certificate#	*CE Hours* ***OFFICE USE ONLY*** L	G	A	O	Total
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							
16.							
17.							
18.							
19.							
20.							

Important Notice to all licensees:
Your meeting sponsor is required to maintain continuing education (CE) attendance documentation in accordance with CCR Title 3, Section 6513. This sign-in sheet will be submitted by the meeting sponsor to CECPM for data tracking of CE attendance credit for your California Department of Pesticide Regulation (CDPR) license/certificate record, which may include reporting of CE attendance credit to CDPR. By signing this document you acknowledge that CECPM is authorized to report the CE attendance credit pertaining to your CDPR license/certificate to CDPR, a public agency of the State of California, and may in turn be subject to disclosure under the California Public Records Act (CPRA).

IMPORTANT: Mail this original sign in sheet immediately to:

CECPM
1521 I STREET
SACRAMENTO, CA 95814

Email: info4ce@cecpm.com
(CECPM SIGN-IN SHEET – August 2021)

↑

DPR NUMBER: If you have more than one license or certificate, enter your ***highest ranking*** license or certificate number as ranked below:

1. **PCA A**gricultural **P**est **C**ontrol **A**dviser License (APCA)
2. **JP/AP P**est **C**ontrol **A**ircraft **P**ilot **C**ertificate **H**older (PCAP)
3. **QAL Q**ualified **A**pplicator **L**icense
4. **QAC Q**ualified **A**pplicator **C**ertificate **H**older