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**Member Name: \_\_\_\_\_\_\_\_\_\_\_**

**OSCT Number: \_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **Date & Time** | **Section****(1a, b etc)****Refer to CEU standards** | **Category/Courses /Lecture Title** | **Duration** | **Name of Speaker** | **Authorized Signature** | **CEUS Credited****(CEU director use only)** |
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| **Adm. Notes:** |  | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  | **Approved total of CEU’s:** | \_\_\_\_\_\_\_\_\_\_\_\_ |  |

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