



## Activity Report Form

Certification Maintenance Program (CMP)

Associate Continuing Education Tracking Program (ACET)

*Please print all information below. An illegible or incomplete form will result in delayed processing.*

### Sponsor Information

Activity Number									
Sponsor Code				Month		Year		No.	

Date of Activity: \_\_\_\_\_

RID Approved Sponsor's Name: \_\_\_\_\_

Activity Title: \_\_\_\_\_

Total Number of CEUs possible: \_\_\_\_\_ Check One: PS  GS

### Instructor Information

Instructor Member ID #				

Instructor Name: \_\_\_\_\_

First time presenting this workshop, please award me CEUs.

Participant Name	City	State	Member #

