Participant Information for Granting Continuing Education Units (CEUs)



Note to Activity Instructor: Please have each participant complete Section 1 of this form. At the conclusion of the activity, complete Section 3 and return all participant forms to Christy Bibbs, Online and Distance Education, Ball State University, Muncie, IN 47306. Completed forms may be e-mailed to cbibbs@bsu.edu or faxed to 765-285-7161. Programs not associated with Ball State University requires a \$10 per person charge. Checks may be made payable to Ball State University. This fee may be paid by the sponsoring organization or by the individual participants requesting CEUs.

SECTION 1: TO BE COMPLETED BY THE PARTICIPANT Name (first, middle, last): Home Street Address: Home City/State/Zip:		
Home Phone:	Male Female	
E-mail Address:	Your Social Security number is required only if you wish to have your activity documented on a special CEU transcript prepared by the Ball State Registrar's Office.	
Social Security No.	- Prepared by the Ball State Registration of Option	
SECTION 2: TO BE COMPLETED BY THE SPONSORING ORG Activity Title: Activity Dates:		
Approval Granted for: Continuing Educat	cation Units	
SECTION 3: TO BE COMPLETED BY THE ACTIVITY INSTRUCTION TO BE COMPLETED BY THE BY THE BY THE BY THE BY THE BY T	YesNo	_

Online and Distance Education, Letterman Building, Room 131 · Phone: 765-285-1581 · Fax: 765-285-7161 · E-mail: distance@bsu.edu