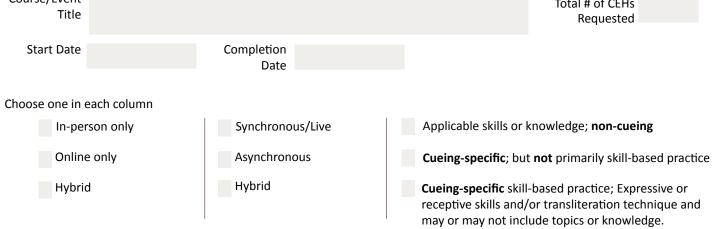


This form is to be completed by the individual, nationally certified cued language transliterator (CLT) seeking Continuing Education Hours (CEHs) for an event that is not already sponsored for TECUnit CEHs. **Payment must be made prior to submission of this form. The course will not be reviewed until both payment and this form are received.** 

		Check #			
Payment Info	rmation (Fee was paid by)	Check	or	Online System	
					Found on emailed receipt.
Applicant Information					
Your Name				CLTID	
E-mail				Phone	
Event/Course	Organizer Information				
Name of Organization					
Address					
Website					
Event url					(if applicable)
E-mail			Pho	one	
Course/Event	Request Overview				
Course/Event					Total # of CEHs



**Description** | *Provide a brief overview of the course.* 

**Learning Outcomes** | *List the learning objectives exactly as devised by the event's presenter(s)/instructor(s).* 

Audience (Role/Level) | Identify the primary audience for this event by both role (e.g., parents) and skill/knowledge level.

Learning Activities and Media | Describe the tasks participants will complete to achieve the learning outcomes.

Assessment/ Evaluations | How will your successful achievement of the learning outcomes be measured by the instructor?

Relevance to Cued Language Transliteration | Describe specifically how you expect this course/event to relate to your practice.

## Leader(s) / Presenter(s) / Instructor(s) / Moderator(s) Information

**Instructor Biography** | *Provide relevant qualifications for each lead facilitator/presenter/instructor/moderator.* 

## **Instructional Hours Breakdown**

Total # of Hours for Event Total # of Direct Instructional Hours \*Direct instructional hours are defined as face-to-face, contact with an instructor (may be delivered through teleconferencing or video recording). Direct hours do not include breaks or meals.

**Breakdown of CEHs Requested** | *Please breakdown the total hours requested. Be sure to specify the number/kind/duration of meetings and number/kind/duration of any outside requirements (e.g., 2 hours of assigned readings/week x 4 weeks = 8 hours). Do not include breaks or meals in your calculation of total CEHs requested.* 

Additional paperwork may be submitted to supplement, **but not replace**, the fields of this form. Forms with any incomplete fields will not be reviewed and returned to the applicant to resubmit. Return this completed form and any accompanying documents to info@tecunit.org.

It is the responsibility of the applicant to contact the host organization and/or instructor to ensure that the information in this application is complete and accurate. **Do not speculate or improvise information like course objectives.** If approved, the applicant must successfully complete the course according to all course requirements to earn CEHs. Refer to the CMP Manual for approved documentation.