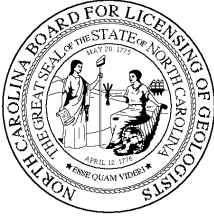


North Carolina Board for Licensing of Geologists
CONTINUING EDUCATION APPROVAL FORM (rev 8/2018)



Approved: YES ____ NO ____ PDH's Approved _____
Approved Code: _____
Date: _____
Signature: _____
Board Use Only

1. Name of Person Requesting Approval: _____
2. Title of Activity: _____
3. Name of Presenter: _____
4. Sponsoring Organization: _____
5. Are you requesting pre-approval to sponsor the course/seminar or attend?
 Sponsoring Attending
6. Will this course/seminar be taught or presented on a repeated basis?
 Yes No
7. Number of hours requested: _____
8. Provide date(s) when activity takes place: _____
9. Address of person or organization responsible for maintaining participation records:
Name of Contact Person: _____
Sponsoring Organization: _____
Telephone: _____ Fax: _____
E-Mail: _____
Address: Street/P.O. Box: _____
City/State/Zip Code: _____
10. If printed course description not available, provide description of course:

11. Explain the relevance of this course to the practice of geology: _____

12. Check the following group most closely affiliated with the sponsor of course being submitted for pre-approval.
 Geologic Professional Society
 Geologic Field Trip
 Geology Department College Course/Seminar
 Other Technical Society Meeting
 Federal or State Government
 Intramural (In-house)
 Other CE Provider