



Certified Soil Classifier

CEU Reporting Form

Return completed form to: EnvironmentalHealth@dph.ga.gov
Email Subject: Soil Classifier CEU Submission

Questions?
Call 404-657-6534

By emailing this form, I certify that all information submitted on this form is correct and true to the best of my knowledge. I am prepared to provide all documentation and proof of hours if requested. I recognize an ethics violation may revoke my certification status.

Name:

Certification Number:

Date of Submission:

- Activity Types:**
- Authorship
- Community Service
- Ethics
- Field Study
- Professional Meeting
- Self-Directed Study

Activity Type:

Title:

Date: # of Hours: Location:

Description:

Activity Type:

Title:

Date: # of Hours: Location:

Description:

Activity Type:

Title:

Date: # of Hours: Location:

Description:

Activity Type:

Title:

Date: # of Hours: Location:

Description:

Total Hours:

* All activities must meet Certified Soil Classifier CEU requirements. Complete additional forms, as needed.