

Certified Soil Classifier CEU Reporting Form

 $\textbf{Return completed form to:} \ \underline{\textbf{EnvironmentalHealth@dph.ga.gov}}$

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:	
Name. Certification Num	.how
Date of Submission	on:
Activity Type:	
Title:	
	# of Hours:
Date:	# Of Hours:
Description:	
Activity Type:	
Title:	
Date:	# of Hours:
Description:	
Activity Type:	
Title:	
Date:	# of Hours:
Description:	
Activity Type:	
Title:	
Date:	# of Hours:
Description:	
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Activity Types:

Authorship Community Service Ethics Field Study Professional Meeting Self-Directed Study

Total Hours:

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