



**Mississippi
College**
A CHRISTIAN UNIVERSITY

Office of Continuing Education

REQUEST FOR CONTINUING EDUCATION UNITS (CEU)

NAME OF PARTICIPANT: _____ DATE _____

ADDRESS: _____

CITY: _____ STATE _____ ZIP _____

CHECK IF NEW ADDRESS

TEACHER LICENSE NUMBER & LAST FOUR OF SOCIAL SECURITY NUMBER*

**Please note this form cannot be processed without this information*

DAYTIME TELEPHONE # _____ EMAIL _____

COURSE OR SEMINAR: **MS COUNSELING ASSOCIATION FALL 2022
CONFERENCE**

PROVIDER: **MISSISSIPPI COUNSELING ASSOCIATION**

INSTRUCTOR(S): **BUTLER, HURLEY, FRAZIER, et al.**

DATE OF PROGRAM: **NOVEMBER 9-11, 2022 – TUPELO**

NUMBER OF CONTACT HOURS: Fee Schedule: **5-10 contact hours (.5-1.0 CEUs) - \$10.00**
11-15 contact hours (1.1-1.5 CEUs) \$15.00

Please mail this completed request form and a check for the appropriate *CEU fee (as indicated by the fee schedule above) made payable to Mississippi College to the address listed below. CEU certificates **will not** be issued after six months of the last date of training. You are therefore strongly urged to submit this request form as soon as possible. *Pay online at www.mc.edu/ceu and include receipt number on this form. Online payment confirmation number _____.

Note:

CEU Certificates will not be issued after six months of the last date of training.

CEU s Office of Continuing Education Mississippi College Box 4031 Clinton MS 39058
www.mc.edu/offices/ce