



**Arizona Parks and Recreation Association
Education Session Proposal Form
Continuing Education Units**

Name of Program: _____

Program Sponsor/Agency: _____

Program Date(s): _____

Program Location: _____

Submitted By: _____ Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____ Fax: _____

Program Type: Workshop Seminar Training Conference Other: _____

Program Outline: Please attach a description of the program with the time frame listed for each session. CEU sessions may be one session of 3 hours and 45 minutes (.3 units) or may be a 1 hour and 15 minutes session (.1 unit).

LEARNING OUTCOMES (Need Minimum of 3):

SPEAKER(S): Name(s) – Agency – Job Title – Address – City, State, Zip – Email – Phone Number

CEU DESIGNEE: _____ Phone _____

CEU PROCESS GUIDELINES

- Obtain approval for CEUs and the credit hour(s) that would be issued to attendees.
- Collect \$5.00 per person for CEUs (checks made payable to APRA). Monies collected need to go to APRA Office with a list of payees.
- Hand out CEU Record of Attendance form which needs to be completed and returned to the designee at the conclusion of the program.
- Verify all CEU Record of Attendance forms and forward to:
Anthony Garcia, APRA Certification Chair, Glendale Parks and Recreation,
5970 W. Brown Street Glendale, Arizona 85302 – agarcia@glendaleaz.com
- Certificates will be processed and mailed in about two weeks after receiving the fees and forms.

Do not write in this box
Number of CEUs Awarded _____
Approved by _____
Date _____