

# CPE Credit Request Form for LEADERSHIP USA Learning Events



Please print this form. ONLY participants REQUESTING CPE CREDIT should sign-in below (attach additional pages or write on back if necessary):

Print Name	Email	Signature	* 1.	* 2.

\* These columns will be completed by the Site Facilitator after the learning event.

1. Do you verify this person attended the entire event (Y/N)? To allow for proper CPE credit calculation, please note time of late arrival, early departure, and/or any time missing (start and end time).
2. Do you verify this person participated in all learning activities as assigned by instructor (Y/N)? Please note any exceptions.

LEADERSHIP USA Site Facilitator (requestor name): \_\_\_\_\_

Day/Date of Learning Event: \_\_\_\_\_

Instructor: \_\_\_\_\_

Title of Learning Event: \_\_\_\_\_

Sponsor Company: \_\_\_\_\_

Address of Simulcast (street, city, state): \_\_\_\_\_

Location of Classroom: \_\_\_\_\_

Start and End Times: 9:00 AM to 2:30 PM Mountain

CPE credits requested: 3.6

I certify the above information is correct.

\_\_\_\_\_  
LEADERSHIP USA Site Facilitator Signature

\_\_\_\_\_  
Date

Upon completion, please return this form to Laura Stack at [Laura@LeadershipUSA.com](mailto:Laura@LeadershipUSA.com). Certificates of completion and CPE credit will be emailed to the listed participants upon verification.