



Form B

Certification Program

Name: _____

**Verification of
Participation -
Criteria
I, II, and III**

Check one of the following:

_____ **Instructional Workshop (I)**

_____ **Outdoor Experiences (II)**

_____ **Site visits, Seminars, Conferences (III)**

_____ Coastal Hours

_____ Piedmont Hours

_____ Mountains Hours

_____ **EE Continuing Education Credit
(for Certified only)**

Directions: Photocopy this page or print from the Web site. Fill out one form for each workshop, outdoor experience and sitevisit, seminar and/or conference that you attend. If the form is for a Criteria III site visit, please check the correct region. Please have your form signed and dated. If it is not signed, you may staple a copy of your participation certificate to this page.

Title of Workshop, Outdoor Experience, Site visit, Seminar, Conference

_____ (Hours) _____

Date of Activity _____ Location _____

Brief description of activity: _____

Instructor's/Interpreter's signature _____ (Date) _____

Position _____

Agency _____