

Oklahoma Department of Agriculture, Food and Forestry

Mail to:
Consumer Protection Services
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CEU Request Application

Sponsor Information

Sponsor Name:		
Contact Persons Name:		
Mailing Address:		
City:	State:	Zip:
Phone:	FAX:	
E-mail:	Website:	

Course Information

Workshop Title:		
Will this workshop be open to the public? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Will a fee be charged? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, how much?	
Course Location:		
Address:		
City:	State:	Zip:
Workshop Date:		
Repeat Date:		
Repeat Date:		
Please include a copy of the agenda if available. Presentation request form must be filled out for each presentation.		

**CEU Request Application
Specific Presentation Information**

Presentation Information

Workshop Title:	
A <u>separate</u> request form <u>must</u> be filled out for <u>each presentation</u>.	
Date of Presentation:	Time of Presentation:
Presentation Title:	
Summary of Presentation:	
Speaker Name:	
Speaker Bio:	
Presentation length (minutes)	

Please consider this presentation for credit in the following Category(s)

<input type="checkbox"/> Aerial <input type="checkbox"/> Ag. Plant (1a) <input type="checkbox"/> Ag. Animal (1b) <input type="checkbox"/> Forest Pest (2) <input type="checkbox"/> Ornamental / Turf (3a) <input type="checkbox"/> Interiorscape (3b) <input type="checkbox"/> Nursery & Greenhouse (3c)	<input type="checkbox"/> Seed Treatment (4) <input type="checkbox"/> Aquatic (5) <input type="checkbox"/> Right of Way (6) <input type="checkbox"/> General Pest (7a) <input type="checkbox"/> Structural Pest (7b) <input type="checkbox"/> Fumigation (7c) <input type="checkbox"/> Public Health (8)	<input type="checkbox"/> Demonstration/Research (10) <input type="checkbox"/> Bird & Vertebrate Animal (11a) <input type="checkbox"/> Predatory Animal (11b) <input type="checkbox"/> Timber Treating (12) <input type="checkbox"/> Antimicrobial (13) <input type="checkbox"/> METAM Sodium (14a) <input type="checkbox"/> Cooling towers (14b) <input type="checkbox"/> Specialty (14c)
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Do not type below this line

ODAFF use only. Approved for Credit in: