| **Course/Topic Name:** | |  | | | | | | | | | | | | | | | | | | | | | **Date:** | /    / | | | | | | |
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| **Course Number:** | | |  | | | | | **Topic Number:** | | | | | | |  | | | | | | **Course Type:** | | | | |  | | | | |
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| **Initial Program:** | | | |  | | **CE Program:** | | | | | | | | | | | |  | | **Auxiliary Program:** | | | | | | | |  | |  |
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| **Number of CE Hours Taught:** | | | | |  | | | | | | | |  | **Was CE submitted electronically?** | | | | | | | | | | | | |  | |  | |
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| **#** | **Name** | | | | | | | | | **Certification #** | | | | | | | **Level** | | | | | | **Signature** | | | | | | | |
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| **Course Number:** | | |  | | | | | **Topic Number:** | | | | | | |  | | | | | | **Course Type:** | | | | |  | | | | |
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| **Course Number:** | |  | | **Topic Number:** | | | |  | | | | **Course Type:** | | | |  |
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| **#** | **Name** | | | | | **Certification #** | | | | **Level** | | | | **Signature** | | |
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