

**MISSISSIPPI UNIVERSITY FOR WOMEN  
COLUMBUS MUNICIPAL SCHOOL DISTRICT  
PROFESSIONAL DEVELOPMENT PROGRAM  
2016-2017  
Continuing Education Unit (CEU) Application**

Please complete the information below. A facilitator will sign this form at the beginning and end of each session. Completed form needs to be mailed with payment of \$20.00 to:

**Mississippi University for Women, Professional Learning, 1100 College Street, W-1635, Columbus, MS 39701**

*Note: Forms will not be accepted after October 1, 2017. Maximum of 5 CEUS can be earned for the 2016-2017 school year.*

Name \_\_\_\_\_

Social Security # \_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Address \_\_\_\_\_

Date	Time	Session Title	CEU's Earned	Authorized Signature Sign In	Authorized Signature Sign Out

*Total CEU's Earned* \_\_\_\_\_

\_\_\_\_\_  
*Principal Signature*

\_\_\_\_\_  
*Date*

**Please make copies as needed to be able to list all sessions.  
Principal and Sign In/Out signature required.**