CMLTM Continuing Education Summary Sheet

Name:	CMLTM #:
5 year date range: Date Submitted:	to
Category 1. Formal Documented	Hours from log sheets:
Category 2. Non-formal Documented	Hours from log sheets:
	Total documented hours:
Category 3. Non-documented	Hours from log sheets:
Category 4. Professional Activity	Hours from log sheets:
Category 5. Non-lab related	Hours from log sheets:
	Total non-documented hours:
Total hours (documented + non-documented):	
Were a total of 45 continuing education ho	urs earned within 5 years? Y/N
Did activities come from a minimum of 3 different categories? Y/N	
Were a minimum of 22.5 hours earned from documented Activity categories? Y/N	

I declare that the above information given by me is correct and complete and that none of the submitted activities herein were required or assigned as part of my job. I acknowledge and understand that providing false information to the CMLTM constitutes professional misconduct and is subject to disciplinary action by the CMLTM.

Signature

Date