



## Activity Report Form

Certification Maintenance Program (CMP)  
Associate Continuing Education Tracking Program (ACET)

*Please print all information below. An illegible or incomplete form will result in delayed processing.*

### Sponsor Information

Date of Activity: \_\_\_\_\_

RID Approved Sponsor's Name: \_\_\_\_\_

Activity Title: \_\_\_\_\_

Total Number of CEUs possible: \_\_\_\_\_ Check One: PS  GS

### Instructor Information

Instructor Name: \_\_\_\_\_

First time presenting this workshop, please award me CEUs.

Activity Number									
Sponsor Code				Month	Year		No.		

Instructor Member ID #				

PLEASE PRINT YOUR NAME CLEARLY AS IT APPEARS ON YOUR RID CARD. IF INFORMATION IS INACCURATE IT WILL DELAY PROCESSING

Member #	Participant Name	City	State

