

# WEST VIRGINIA UNIVERSITY

## Application for approval of a CONTINUING EDUCATION UNIT (CEU) Program

Requesting Unit: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Program Titles: \_\_\_\_\_

**Please attach a Syllabus or Overview showing Learning Outcomes & Assessment**

Program Dates:            From: \_\_\_\_\_            To: \_\_\_\_\_

Instructor's Name: \_\_\_\_\_

Instructional Format: \_\_\_\_\_

Attendance/Passing Requirements for Awarding CEU's: \_\_\_\_\_

Sponsoring Unit: \_\_\_\_\_

Course Title: \_\_\_\_\_

Instructional or Contact Hours: \_\_\_\_\_

Anticipated Number of Attendees: \_\_\_\_\_

Submitted by: \_\_\_\_\_

Date

Approved by: \_\_\_\_\_

Date

This application has been approved for \_\_\_\_\_ CEU's to participants completing program requirements.

\_\_\_\_\_  
COURSE KEY NUMBER

Return to:

WVU Extended Learning  
Attn: Sherry Kuehn  
950 W. Everly Street/P O Box 6800  
Morgantown WV 26506-6800  
Phone: 304-293-7635  
Fax: 304-293-4899