



CERTIFICATE OF COMPLETION OF CEUS FOR NON-IHTP SPONSORED WORKSHOPS

(PLEASE USE THIS FORM ONLY WHEN THE SPONSORING ORGANIZATION
DOES NOT GIVE CEU CERTIFICATES FOR THE WORKSHOP)

Name: _____

HAS COMPLETED _____ CONTACT HOURS

AT THE _NAME OF WORKSHOP/
CONFERENCE_____

SPONSORED BY_____

ON
DATE:_____

OBJECTIVES FROM THIS WORKSHOP/CONFERENCE WHICH DIRECTLY
APPLY TO THE WORK OF A CERTIFIED MUSIC PRACTITIONER:

SPONSORING ORGANIZATION REPRESENTATIVE DATE

