Continuing Education - Course Information

For which Continuing Education (CE) period is this course?			
	he credit hours being	reported are for the current CE period.	
The credit hours being reported are for a prior CE period.			
P	lease enter the Titl	e and Description of the course:	
Title:			
Description:			
	Completion Date:		
	Number of Hours:		
Were you the instructor for this course?			
Did you receive a certificate?			
	Please indica	ate the course category:	
○ Et	hics/Professional Con	duct	
	 Entitlement to, or eligibility for, benefits under titles II and XVI of the Act; 		
Other course related to entitlement to, or eligibility for, benefits based on disability under titles II and XVI of the Social Security Act (the Act);			
Please	indicate the type of	of Organization providing the course:	
O Ad	Accredited College/University		
O St	State Bar Association		
O 0	Organization Accredited by a State Bar		
 Professional Organization that (in whole or in part) specializes in representing claimants before governmental agencies 			
O G	overnmental Agency	9.	
Name of Co	ollege or Institution:		
N	ame of Instructor or Contact Person:		
	Phone Number:		
	baU	ate Information	

Back

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