



**Universal Foundation for Better Living
Johnnie Coleman Theological Seminary
Credentials and Certification Department**

CEU (Continuing Education Unit) Approval Form

Please complete and submit this form to the UFBL Credentials and Certification Department for all CEU activities.
Submit one form per activity.

MAIL: JCTS Credentials and Certification Department,
21310 N.W. 37th Ave.
Miami Gardens, FL 33056
Attn: Markea Johnson
FAX: 1-305-628-2008

EMAIL To: ehcoleman@jctseminary.org

DATE OF REQUEST: _____ **TOTAL NUMBER OF FACE TIME HOURS:** _____

REQUESTOR'S INFO:

Name _____
Address _____
Day Phone _____ **Evening Phone** _____ **E-mail Address** _____

ACTIVITY (Check Type):

Approval Required

Pre-Approved

Name of Activity _____

Sponsor/Instructor/Presenter _____

Location _____

Dates _____

Brief Description of Activity (Attach all pertinent information such as course descriptions, pamphlets, brochures, etc.)

SPONSOR SIGNATURE: _____ **DATE:** _____

APPROVAL: All CEU's will be awarded upon the receipt of all records/documents of completion.

Evelyn Hill Coleman

Evelyn Hill Coleman, Dean
JCTS Credentials and Certification Department

_____ **# of CEU's**

_____ **Date**

Office Use Only: # CEU's Awarded _____ Date _____ CEU Period _____ License Period _____ Initials _____