Connecticut Department of
Energy & Environmental Protection
Bureau of Natural Resources
Forestry Division

Forest Practitioner Continuing Education Summary Form

This form can be used by practitioners as an aid in keeping track of completed continuing education units. This form should be retained by practitioners and not submitted to the Division of Forestry.

Practitioner Name:_____ Certification Period: _____--_____

Seminars/Conferences/Workshops				
Name of event	Sponsoring Organization	Date	Location	CEUs earned

Webinars				
Title of Webinar	Sponsoring Organization	Date	Duration	CEUs earned