| **2017 Course Description Form**(for use in petitioning for allocation of CPE credits for participation in courses and events) |
| --- |
| The name of the Providers of the event or course |  | Insert Details Requested: |
| The name and location of the event or course |  | *Insert Details Requested:*  |
| The dates of attendance at the course or event |  | *Insert Details Requested:* |
| A description of the subject matter covered, and the time involved (*e.g.* 30 minute presentation on disease identification)  | Insert Topics covered/ Outline of Presentations  | Presentation **(**mins)  | Discussion (mins) |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| The names and qualifications of each of the instructors  | Insert Details Requested for each Instructor: |
|  |
| IASIS Website | *Do you wish to have this event information included on the courses and events section of the IASIS website where it can be publicly viewed prior to the event?* |
| Name and email address of applicant | *Insert Details Requested:* |
| Signature and date | *Insert Signature of petitioner, and date submitted:* |