Metropolitan Area Building & Construction Department

271 W. 3rd St. N., Suite 101 - Wichita, KS 67202 - www.sedgwickcounty.org - TEL: 316-660-1840 - FAX: 316-660-1810

# CEU LOG

Classification: ☐ Master ☐ Journeyman

_____
Please PRINT Name

_____
Home Address City State Zip Code

(_____)_____ (_____)_____ _____
Home Phone Cell Phone Email Address

_____
Please print name of Company or current employer

_____
Business Address City State Zip Code

FOR THE REPORTING PERIOD JANUARY 20_____ TO DECEMBER 20_____

As per state statue, each licensee is required to maintain the records for at least 4 years to support credits claimed, and keep attendance verification records in the form of completion certificates or other documents supporting evidence of attendance and must present them to Metropolitan Area Building and Construction Department upon request.

| **Dates of Activity MM DD YY** | **Title of Program/Description** | **Name of Sponsoring Organization/School Location (City & State)** | **Number of CEU's Earned** |
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The undersigned makes application to the board of examiners for a certificate of the class indicated above. The statements and answers contained herein are true to the best of my knowledge and belief.

Signature _____ Date_____

OFFICE USE ONLY

Certificate Number: _____ Date:_____