

## **Office of Workforce Development and Training Continuing Education Unit (CEU) Request**

Please complete the information below and submit all required documents to the Office of Workforce Development and Training. A record of attendance (i.e. sign-in sheet, roster) must be submitted at the conclusion of the event. All records will be maintained by the Office of Workforce and Development for six years.

### **Organization/Agency:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Contact Person: \_\_\_\_\_

### **Training Event Information:**

Title: \_\_\_\_\_

\_\_\_\_\_

Date(s): \_\_\_\_\_

Location: \_\_\_\_\_

Estimated of number of attendees: \_\_\_\_\_

Total # of CEUs requested: \_\_\_\_\_

(1 CEU awarded for every 1 hour of face-to-face instruction.)

Signature: \_\_\_\_\_

Date requested: \_\_\_\_\_

The Office of Workforce Development and Training staff will contact requester to confirm actual number of CEUs approved. **Please do not advertise CEU's to be awarded until receipt of confirmation.**

Please submit form, including all instructor resumes/CVs and record of attendance to:

The Office of Workforce Development & Training

ATTN: Ms. Greer Brown, Registrar

Behavioral Health Administration

Voc. Rehab. Building

55 Wade Avenue

Catonsville, MD 21228

Forms, resumes and attendance sheets may also be e-mailed to [greer.brown@maryland.gov](mailto:greer.brown@maryland.gov) or faxed to 410-402-8604. For additional information, contact the OWDT at 410-402-8585.

**Agenda:** You may submit the Agenda for the training event or list each training session (course, workshop, plenary presentation, etc.) separately. Include additional pages of Agenda content as needed.

**1) Title:**

**Content Summary:**

**Instructional Method:**

**Learning Objective(s):**

**Session Duration:**

**Instructor:**

**2) Title:**

**Content Summary:**

**Instructional Method:**

**Learning Objective(s):**

**Session Duration:**

**Instructor:**

**3) Title:**

**Content Summary:**

**Instructional Method:**

**Learning Objective(s):**

**Session Duration:**

**Instructor:**

**CERTIFICATES/CEUs:**

The Office of Workforce Development and Training is approved to grant Continuing Education Units (CEU) by the organizations listed below. All course and workshop participants will receive a certificate of participation for each training event they attend. ***Participants must attend all hours of training in order to receive a certificate.***

***Alcohol and Drug Counselors and Certified Professional Counselors*** - The Maryland Board of Professional Counselors and Therapists has approved all courses, workshops and seminars for CEU, Category A.

***Social Workers*** - The Maryland State Board of Social Work Examiners has approved all courses for Category I CEU.

***Psychologists*** - The State Board of Examiners of Psychologists has approved all courses for CEU.

The Office of Workforce Development and Training must be listed as a co-sponsor of your training event and the following language must be included when marketing the event and in printed training materials (brochures, flyers, event agenda, etc.):

**“Co-sponsored by the Maryland Behavioral Health Administration’s Office of Workforce Development and Training.”**

**“The Maryland Behavioral Health Administration’s Office of Workforce Development & Training is an approved sponsor of the Maryland Board of Social Work Examiners for \_\_\_ Continuing Education Units (Category I) for licensed social workers in Maryland; as a sponsor of \_\_\_ Continuing Education Units acceptable to the Maryland Board of Examiners of Psychologists; and \_\_\_ Continuing Education Units (Category A) by the Maryland Board of Professional Counselors and Therapists, upon completion of this training and a completed evaluation. The Office of Workforce Development & Training maintains responsibility for this program.”**

**Office of Workforce Development and Training Use Only**

**Reviewed By:**

**Date:**

**#CEUs Granted:**

**Comments:**