AMI Continuing Education

Continuing Education Activity Verification Form

This form **MUST** be submitted within 30 days after you have completed your **activity**, or **no credit** will be entered for the course. Shortly after submission of this form you will receive a confirmation email for your records and if you are an AMI member, your CEU database on the AMI web site will be updated.

If the course has not been preapproved for CEUs by the AMI's Continuing Education committee **DO NOT** submit this form until the course has been evaluated.

This is to verify that ____________________________________________ has completed the following workshop, course or program (educational event) and should have continuing education units recorded.

Activity name: ______________________________________________________________
Sponsoring organization (if any): _________________________________________________
Location: ____________________________________________________________________
Date of activity: _____________________________________________________________
Instructor(s): _________________________________________________________________
Total contact hours: ____
This activity is classified as:
___Art
___Biomedical Science
___Business

CEU/Hour Requirements for Recertification:
0.1 CEU = 1 hour of contact time
• Art: 1.4 CEUs/14 hours **minimum required**
• Biomedical: 1.4 CEUs/14 hours **minimum required**
• Business: 0.7 CEUs/7 hours **maximum optional** - You may have **up to** 0.7 CEUs/7 hours of business credits as part of your total, **or** in lieu of Business CEUs/hours you may use additional Art or Biomedical hours

A total of 35 hours is required at the end of the 5 year certification period to retain CMI status.

I am a member of the AMI: yes _____ no _____

Signature of attendee: ________________________________

Evaluation:
Did the instructor and course material meet the stated objectives? Yes _____ No _____
Were the facilities and environment conducive to learning? Yes _____ No _____
I would recommend this event to other AMI members. Yes _____ No _____

Comments:

Revised: 12/08