## FORM 10G



## **Site Renewal Application**

**CEU Site** 

This form can only be used by agencies that have been previously approved by the ICDVP Board of Directors and are in good standing.

Name of Agency:						
Address:						
Training Contact Person*:						
*Name listed on the ICDVP Website						
Telephone:		Email:				
	(s) of Certified Individual(s) verseeing CEU Training		e	Certification # and Expiration Date		Number of Years in Position
Include the Following for CEU Site Renewal.						
Copy of training certificate or letter of completion provided during previous certification period.						
Certificate must state the agency is an ICDVP certified CEU training site and must be signed by a						
current CDVP overseeing the training.						
Copy of CEU notice/flyer provided during previous certification period that matches above certificate.						
Check, money order, or online payment for \$200.00.						
~~~~~~ STAFF USE ONLY ~~~~~~~						
Approved	Denied		Pending	ng Date:		
Signature of Reviewer:						