

FORM 10H



Site Renewal Application CEU Site (NON-DV 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: | |
| Name(s) of Certified Individual(s) Overseeing CEU Training | Title | Certification # and Expiration Date | Number of Years in Position |
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| Include the Following for CEU Site Renewal (NON-DV Site). | | | |
| 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 | Date: |
| Signature of Reviewer: | | | |