

# ARROW CEU Request Form

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

Work Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Check Module(s) you are submitting:

\_\_\_ Module 1: 1.5 CEUs available \$75

\_\_\_ Module 2: 2.0 CEUs available \$75

\_\_\_ Module 3: 1.0 CEUs available \$50

**Please send in each module as you complete it**

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**Date Submitted** \_\_\_\_\_

**Module 1** (1.5 CEUs) I, \_\_\_\_\_, completed the following.

- Train/educate administrator
- Upgrade policies/procedures
- RT referral form
- Evaluation of module

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**Date Submitted** \_\_\_\_\_

**Module 2** (2.0 CEUs) I, \_\_\_\_\_, completed the following.

- 5 RT protocols
- Train staff and submit attendance list
- Assessment Competency Checklist
- Evaluation of module

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**Date Submitted** \_\_\_\_\_

**Module 3** (1.0 CEUs) I, \_\_\_\_\_, completed the following.

- Test
- 3 Case scenarios
- Photo of poster
- Evaluation of module

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If you have any questions, please contact: Linda Buettner (llbuett@uncg.edu) or  
Amy Chandler (amy\_chandler@uncg.edu)

**Mail forms to: RTH, Attn: Linda Buettner, 420-A, UNCG, Greensboro NC 27402**

**THANK YOU FOR PARTICIPATING IN THE ARROW TRAINING**