

# Mississippi

## State Board of Examiners for Social Workers

### Designated Provider

### Report of Continuing Education Offering

This form provides a record of each upcoming continuing education session sponsored by Designated Providers and offered to Mississippi Social Workers. Designated Providers should complete the following information and submit to the Board at least thirty (30) days prior to the session so that information can be posted on the BOE website. Additionally, following the session, the DP should submit a blank sample of the certificate of attendance which was provided to attendees and attendance verification for each attendee (usually a sign-in sheet).

#### Information about the Designated Provider:

Agency/Organization Name \_\_\_\_\_

Designated Provider Number \_\_\_\_\_

DP Renewal Date \_\_\_\_\_

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

Contact Information \_\_\_\_\_

#### Information about the Continuing Education Session:

Name of Program \_\_\_\_\_

Date of Program \_\_\_\_\_

Location of Program \_\_\_\_\_

Number of Total Sessions \_\_\_\_\_

Total Number of CE Hours Available \_\_\_\_\_