



Continuing Education Credit (CEC) Verification Form

For the AFMA Certified Floodplain Manager (CFM[®]) Program

Name: _____

Certification Number: _____

Formal Name of Course/Workshop:

Offered By: _____

Date of Training/ Education/Workshop: _____

Location of Training/ Education/Workshop: _____

Length of class in days. If less than one day, list the actual number of class hours (do not count breaks, lunch, etc.)

CEUs, CECs, Credits or Clock Hours Issued by Offering Entity: _____

Is the activity pre-approved on the ASFPM pre-approved list (www.floods.org) or the AFMA pre-approved list in the "[Continuing Education Credit \(CEC\) Policy](#)" document? _____

Attach certificate or attendance document. If the training is not a pre-approved course, also attach the Course/Workshop Agenda, instructor name and phone number, and, if available CEC documentation issued by offering entity (university, association, agency, etc.). If there are concurrent sessions on different subjects, circle the sessions that you attended. If no certificate or attendance document is available, you must get this form signed by the instructor.

CFM Applicant Certification: I am certifying that the information listed above, referencing my Continuing Education Credit (CEC), is correct.

Submitted by: Date: _____ CFMs Signature _____

Instructors Signature*: _____

* Only required when no certificate or attendance document is available.