

**SUGGESTED MODEL**

*SC Planning Education Advisory Committee (SCPEAC)*

**UNIFORM CERTIFICATE OF ATTENDANCE FOR ORIENTATION PROGRAM AND  
CONTINUING EDUCATION (CE)**

**Sponsor:** \_\_\_\_\_

**Activity Title:** \_\_\_\_\_

**Date of Attendance:** \_\_\_\_\_

**Location:** \_\_\_\_\_  
City State

**Authorized Orientation Program or Course Number:** \_\_\_\_\_  
(as established by the Advisory Council)

**This program has a total of:**  
\_\_\_\_\_ CE credit hours (based on a 60-minute hour)

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**TO BE COMPLETED BY ATTENDING OFFICIAL OR EMPLOYEE**

**By signing below, I certify that I attended the activity describe above and am entitled to  
claim:**

\_\_\_\_\_ Orientation Program Hours

\_\_\_\_\_ CE Credit hours

**I am also certifying that I attended the session with faculty and/or a professional planner as a  
discussant in person.**

\_\_\_\_\_  
**NAME OF APPOINTED OFFICIAL or EMPLOYEE (please print)**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**NAME OF COMMISSION or EMPLOYEE POSITION**

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