



Please complete the following information annually and provide the necessary documentation to CRDHA.

<b>Name of Study Club:</b> _____			
<b>Name of Study Club Contact Person:</b> _____			
<b>Meeting Location(s) of Study Club:</b> _____ _____ _____			
<b>Date</b>	<b>Course Title</b>	<b>Speaker(s)</b>	<b>Hours</b> Indicate any significant breaks (eg. 1 hr. lunch)
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
<b>Please provide attachments for the following:</b> Curriculum Vitae of Speaker(s) Course Content Course Objectives			
<b>Please be advised that this submission must be received by the CRDHA Competence Committee at least 60 days prior to the anticipated course date to allow adequate time for the committee to determine program credits.</b>			