



ECU

RESEARCH, ECONOMIC DEVELOPMENT & ENGAGEMENT

300 E. 1st St. Willis Building • Greenville, NC • 27858-4353
(252) 328-9198 office • cpe@ecu.edu email

THE CEU

The **Continuing Education Unit (CEU)** is a nationally recognized measure of participation in an approved non-credit continuing education program. One Continuing Education Unit (1.0) is defined as *“Ten contact hours of participation in an organized continuing education experience under responsible sponsorship, capable direction, and qualified instruction.”*

East Carolina University is among the many colleges and universities throughout the nation that award CEUs to participants of approved programs. Each participant satisfactorily completing approved non-credit courses, seminars, conferences, or workshops offered through the Continuing Professional Education unit in the Division of Research, Economic Development and Engagement is awarded CEUs in recognition of their involvement.

The program in which you are participating has been approved for CEUs based upon 0.1 unit for each contact hour of instruction. If you wish the approved units to be awarded, complete and turn in the CEU registration form below. This action will cause a permanent record to be established in your name and identification number. This record will be maintained under the auspices of the Office of Continuing Professional Education. Should you ever require a copy of CEUs earned in approved programs at East Carolina University, please make your request in writing. You should include your name, identification number, program title and date of attendance (if possible) in your request. Submit the written request to: **East Carolina University, Continuing Professional Education, Division of Research, Economic Development and Engagement, 300 E. 1st Street - Willis Building, Mail Stop 310, Greenville, NC 27858-4353.** If a question should arise in the future, write to this address or call (252) 328-9198.

Continuing Education Unit Registration Form

Please Print -- Complete All Information

Program Title _____ Program Date(s) _____

Name _____

Business Address _____
Street/PO City State Zip

Home Address _____
Street/PO City State Zip

(Phone) _____ (Email) _____

Participant Signature _____

OFFICE USE ONLY	
Amount Pd. \$ _____	CEU Typed _____
Date Rec'd. _____	CEU Billed _____

Email completed form to cpe@ecu.edu.