



INTERNATIONAL COMMISSION  
ON HEALTH CARE CERTIFICATION

## Training Program Application for ICHCC CEUs

Fees: 1-day program  
\$100.00

2 days or more  
\$150.00

Late Fee (<30 days for approval)  
\$50.00

**Approved CEUs are in effect for a 12 month period from date of approval notification**

Applied Credential (Check as many as may apply to your training):

CLCP/CCLCP    MSCC    CHRM    CGCM    CLCM    CDE

Conference Title: \_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Program Objectives: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Requested Number of Contact Hours/CEUs: \_\_\_\_\_

Contact Person and Phone Number: \_\_\_\_\_

\_\_\_\_\_

Agenda:

Please attach a copy of the conference program agenda.

Course Content:

Please attach a summary of each session's course content.

Speakers:

Please attach a list of speakers and their curriculum vitae.