

CFSP Credit Request Form

Point Update Form

(Please type or print in information and provide your preferred mailing address, phone and fax number. Make a copy of your completed form for your own records. Activities must have taken place before you can submit them for credit.)

Please Print or Type

Name & Company: _____

Address: _____

Phone: _____ Fax: _____

Email: _____

Type of Activity	Date	Location	Sponsor Title (for published articles or speeches)
1.	_____		
2.	_____		
3.	_____		
4.	_____		
5.	_____		

This form must be completed and returned to the CFSP program administrator along with proof of attendance if applicable (i.e., certificate, brochure, etc.) **ONLY THIS FORM IS ACCEPTABLE FOR NEW ACTIVITIES.**

Signature _____

Date Submitted: _____

Return to:

Vonceil Roberts, Program Coordinator
NAFEM
161 N. Clark Street, Suite 2020
Chicago, IL 60601
Phone: +1.312.821.0201
Fax: +1.312.821.0202