



SPECIAL REVIEW FORM

Directions

This form should be used to report detailed information for the activities taken from non-approved providers or activities that do not appear on a transcript from an ABA approved provider, courses taken on an audit basis, and publications. Record only one activity on this sheet. Make additional copies of this form as needed. Be certain also to record the activity on your ABA Continuing Education Tracking Form.

Special Directions for Publications

Provide the following information on this form: Publication date, title of publication, name of publisher/name of journal, number of hours requested. The maximum number of contact hours allowed in a three-year certification period for publications is five (5). Attach a copy of the cover page of the article or book. Include a copy of the table of contents if you are requesting credit for a chapter in an edited book.

Name:

Course/Activity Title:

Date(s):

Contact Hours Requested for Recertification Credit:

Instructor's Name:

Sponsoring Organization:

Brief Description of Course/Activity/Publication