IPM ACCREDITATION PROGRAM
Continuing Education Credits (CEC)

Official Attendance Record

Date:
Session Title:
Presenter:

NAME	IPM Certification #	Employer

Attested by (please print name):	**Signature:**
Host Organization:	

Return to: IPMAP at University of Guelph, Ridgetown Campus
120 Main Street East
Ridgetown, ON N0P 2C0

Must be submitted within 30 days of event

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