Course Evaluation Record

.....



#

Course/Activity Name	
Training Provider:	
Contact:	L.
Address:	
Evaluation Criteria Met (Check Box if requirement is satisfied)	
 Course or activity has a clear purpose, objective and scope Course or activity type is consistent with PIE Procedure Manual Section 4.1 Instructor qualifications met Duration of contact time of course or activity can be determined Course or activity material is sufficient in content and detail to develop, maintain, improve or expansion knowledge of an engineering licensee An Assessment of the learning that will result from participants in the course will be provided as participants. 	
This course/activity is Accredited / Not Accredited for credit to satisfy mandatory continuing education requirements for the following design professionals licensed in NYS: (Check all that apply) Professional Engineering Land Surveying Architecture Landscape Architecture Geology Ethics This course/activity is classified as: CE Training/Activity Other CE Training/Activity (qualifies for only 18 of 36 hours, disclosure statement on certificate)	
Continuing Education Credit / Professional Development Hours (PDH) Requested: Assi	gned:
Evaluator Name #	
Signature: Date:	
Comments:	
Reason for Reduction or Recommendation for Rejection:	
A 2 nd opinion is required to reject a course/activity or award partial credit if a review is requested. Reductions in number of PDHs allowed due to evaluation of actual instructional time do not require a 2	2 nd opinion.
<u>2nd Opinion</u> Evaluator Name #	
Professional Development Hours (PDH) assigned:	l
Signature: Date:	
$\ _{\text{Comments:}}$	ا !