California Escrow Association - Professional Designation
Annual Continuing Education Course Verifications - PD FORM 502

Name: _____ Designation: CEO CSEO Other

Mailing Address: _____

City/State/Zip: _____

Daytime Phone: _____ SS# _____

Member Of What Region: _____

The following credits were earned in the year: ____

$40 Administrative Fee Enclosed? (see below) Yes No

Return this form to: CEA Headquarters, 530 Bercut Drive, Suite G, Sacramento, CA 95814

Filing Requirements:

- Every CEA member who holds a Professional Designation is on the same three-year cycle.
- By the end of the three-year cycle you must have earned 45 credits and reported same to CEA.
- If you earn your P.D. during a cycle period, you will be required to obtain a minimum of 15 credits per year for the BALANCE of the current cycle.
- There is no minimum number of credits that must be earned in any one year.
- If credits are submitted by December 31st of the year in which they are earned, there is no fee.
- If credits are submitted after December 31st of the year in which they were earned, there is a $40 administrative fee for <u>each</u> late year that must accompany this form before your credits will be processed.
- You MUST use this form for submitting your credits to CEA.

Reinstatement: Effective January 1, 1997, after one full year of non-membership, the designation lapses and a $50 reinstatement fee, alongwith the membership dues and late charges must be paid in order to reinstate your P.D. Reinstatement will not be approved unless the membership is renewed prior to December 1st of the second year of non-membership. Continuing education requirements for the current cycle must still be met and will not be prorated.

Course Credits	Date Completed	Course/Workshop/Event Title (list each 501 form separately)

TOTAL CREDITS EARNED: _____

_____

Professional Designation Holder's Signature

_____

Date Signed and Submitted

I certify that I have taken and completed all the courses/workshops/events listed above and I have attached with this, each white original (signed and stamped) 501 Form as evidence of having earned credits.

FOR COMMITTEE/HEADQUARTERS USE

# of credits approved _____
approved by _____
date approved _____
date entered _____
fee(s) paid admin. fee $ _____
reinstatement $ _____
ck # _____

rev. 8/98