



Champions For Effective Local Government

## Certified Municipal Officials (CMO) Program

### Request for Approval of Outside or Prior Credit

Date of Request: \_\_\_\_\_

Participant's Name: \_\_\_\_\_

Municipality: \_\_\_\_\_

Office or Position: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone Number/E-mail: (\_\_\_\_) \_\_\_\_\_ / \_\_\_\_\_

Name of Meeting or Session attended: \_\_\_\_\_

Location of Meeting or Session attended: \_\_\_\_\_

Date of Meeting or Session attended: \_\_\_\_\_

Hours of Meeting or Session attended: \_\_\_\_\_

***Please be sure to include an agenda, sign-in sheet (or something similar) and any other documentation that might assist the committee in their decision with this form to ensure proper credit is given.***

Signature: \_\_\_\_\_

*Do not write in this box – for office use only.*

Credit Hours Allowed: \_\_\_\_\_

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_