



# Society for Range Management

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## Certified Professional in Rangeland Management CONTINUING EDUCATION UNIT DOCUMENTATION

Attendee Name: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

COURSE/WORKSHOP/SYMPOSIA DATE: \_\_\_\_\_

COURSE/WORKSHOP/SYMPOSIA TITLE:

LOCATION: \_\_\_\_\_

PRIOR APPROVAL FOR CEU'S:       YES       NO

NUMBER OF CEU CREDITS APPROVED: \_\_\_\_\_

ATTENDANCE CERTIFICATION:

The above-named individual attended and completed this course.

\_\_\_\_\_  
Signature of Course Trainer/Facilitator

MAIL, EMAIL OR FAX COMPLETED FORM TO:

**Society for Range Management**  
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Littleton, CO 80128  
fax 303-986-3892  
[vt rujillo@rangelands.org](mailto:vt rujillo@rangelands.org)