Professional Development Reporting Form for Reinstatement Applicants

For the period ____/____/ 20_____ through ____/____/ 20_____

West Virginia Engineering Law requires that each registered professional engineer in the State of West Virginia must meet continuing education requirements as a condition for license renewal. Fifteen (15) Professional Development Hours are required per year, with a total of thirty (30) Professional Development Hours (PDH's) required for each biennial renewal period.

YOU MUST SHOW A MINIMUM OF THIRTY (30) HOURS OF ACCEPTABLE CONTINUING EDUCATION EARNED WITHIN THE LAST TWO YEARS TO BE APPROVED FOR REINSTATEMENT.

PROFESSIONAL DEVELOPMENT HOURS EARNED			
#	DATE(S)	DESCRIPTION and SPONSORING ORGANIZATION	PDH
1	/ /20 to / /20		
2	/ /20 to / /20		
3	/ /20 to / /20		
4	/ /20 to / /20		
5	/ /20 to / /20		
6	/ /20 to / /20		
	Add additional sheets if necessary	**TOTAL HOURS EARNED**	
		CARRYOVER INTO NEXT YEAR (MAXIMUM OF 15 PDH'S)	

1 College or unit semester course (3 credit hours)	45
1 College or unit quarter course (3 credit hours)	30
1 Continuing Education Unit	10
1 Hour in course work, seminars, professional conventions, workshops	1
1 Hour of **teaching** in course work, seminars, professional conventions, workshops	2
Each published paper or article on engineering subjects	10

§ 7-1-10.7 of WV Rules and Regulations:

Each registrant is charged with the responsibility of his or her own professional development activities. The registrant shall maintain the records to be used to support credits claimed for professional development activities. Records required include, but are not limited to: 1) a log showing the type of activity claimed, sponsoring organization, the activity's location and duration, instructor's or speaker's name, and PDH credits earned; 2) attendance verification records in the form of completion certificates, paid receipts or other documents supporting evidence of attendance. These records shall be maintained for three renewal cycles. Copies of these records or supporting documentation may be requested by the Board for approval and verification purposes.

By my signature below, I hereby certify the summary of credits given above is correct. I have earned the credits stated and it accurately reflects the PDH's I have claimed during the period noted at the top of this page.

Print Name: _____ **Signature:** _____ **Date:** ____/____/ 20_____
First MI Last

Address: _____ - _____
Street Address City State Zip

Telephone: ( ) - _____ **E-Mail:** _____ **WV Registration #:** _____

Revised 3-1-2017