

**National Association of Housing Counselors and Agencies, Inc.
Continuing Education Units Form**

CATEGORY	PRESENTER/FACILITATOR ORGANIZATION	COURSE NAME	COURSE DATE	CERTIFICATE Y or N	NAHCA ONLY	
					CURRICULUM	CEU HRS
Pre-purchase						
Tenancy						
Mortgage Default						
Reverse Mortgage						
Fair Housing						
Post-Occupancy						
Other:						

MEMBER INFORMATION:	NOTES:
Name: _____	This form is to assist you to record your Continuing Education Units (CEUs) - 36 CEUs are required to maintain your certification. All courses should be recorded and submitted to: NAHCA, Attn: Sandra L. Moore, P. O., Box 91873 Lafayette, LA 70509 – 1873 along with a copy of your course certificate and a copy of the curriculum covered. CEUs will be credited for courses not already assigned CEUs and you will be notified of the credits. Only courses that pertain to housing or housing-related topics will be considered.
Address: _____	
Organization: _____	
Telephone: _____	
Date: _____	