



THE COLLEGE OF DENTAL TECHNICIANS
OF BRITISH COLUMBIA

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Continuing Education – Study Club Application

APPLICATION FOR APPROVAL OF A STUDY CLUB:

- Study Club must have a minimum of **2 members**.
- Study Club is approved for **one year**. Subsequent approval of Study Club is required **ANNUALLY in advance**.
- To obtain CE credits, attendance must be recorded and reported to the College office on prescribed **sign in sheets**, verified by presenter or an officer of the Club.
- If available, attach a proposed schedule of meetings for **ONE-YEAR** period.

Name of Club: _____

Defined Objectives: _____

Anticipated Topics/Speakers: _____

Club Officer Name & Phone: _____

Applicant Name & Phone: _____

Frequency of Meetings: Monthly Quarterly Occasionally

Do you want this study club advertised on the College website: Yes No

Applicant's Signature _____

Date _____

FOR OFFICE USE ONLY

COMMENTS: _____

DATE APPROVED: _____

APPROVAL NUMBER: _____

DATE NOT APPROVED: _____

APPROVAL SIGNATURE: _____