

REGISTERED ENVIRONMENTAL HEALTH SPECIALIST - Continuing Education Verification Form

INSTRUCTIONS: Complete ALL sections below to verify completion of 24 contact hours of Registered Environmental Health Specialist (REHS) continuing education. If necessary, continue on a separate sheet of paper.

DO NOT SEND ORIGINAL CERTIFICATES OR COPIES UNLESS INSTRUCTED BY THIS OFFICE. Copies of your certificates will be required to document course completion by the Environmental Health Specialist (EHS) Registration Program during the audit process. If you are selected for an audit, you will be notified by email. ***You MUST sign the signature line at the bottom of this form to certify the authenticity of your reported continuing education courses.***

NAME: _____

REHS # : _____

SEND THIS COMPLETED FORM ALONG WITH YOUR RENEWAL APPLICATION AND PAYMENT TO:

California Department of Public Health
 EHS Registration Program
 1725 23rd Street, Suite 110
 Sacramento, California 95816

DATE OF COURSE	CONTACT HOURS RECEIVED	COURSE TITLE	RECOGNIZED PROVIDER/ INSTRUCTOR	ACCREDITATION AGENCY	LOCATION
TOTAL HOURS =					

I certify that I have taken the courses listed above and will have certificates in my possession to verify successful completion of the continuing education courses listed. I understand that I am responsible for maintaining these legal documents for five years.

Signature: _____

Date: _____

FOR EHS REGISTRATION PROGRAM	<input type="checkbox"/> REHS CE Hours Complete	<input type="checkbox"/> Need Further Review	<input type="checkbox"/> Selected for Random Audit
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