



Participant Initiated Non-RID Activities (PINRA)

This form will be used if a CMP Participant plans to attend another organization's workshop, conference, formal in-service training or activity. The RID Approved Sponsor will determine if the activity is appropriate for CEUs.

Before the start of the activity/conference, this section should be filled out and signed by both the participant and RID Approved Sponsor:

Participant Name: _____ RID Member #: _____

Participant Address _____

Email: _____ Phone # _____

Activity/Conference Name: _____

Activity/Conference Theme or Focus (attach brochure/flyer) _____

Date and Times of activities you will attend: _____

Total number of CEUs to be awarded: _____ Circle content area: Professional Studies General Studies

I certify that this activity/conference represents a valid and verifiable Continuing Education Experience that exceeds routine employment responsibilities.

Participant Signature: _____ Date: _____

Name and Code of RID Approved Sponsor Florida Registry of Interpreters for the Deaf

I certify that I received this activity plan prior to the start of the activity/conference and I agree to sponsor this Continuing Education Experience. I will verify successful completion prior to awarding CEUs.

RID Sponsor Administrator Name: _____ Signature: _____

RID Sponsor Code: 0049 _____ Date: _____

This section should be filled out and signed upon completion of the activity/conference:

Activity Code Number _____ CEUs Awarded: _____

I have verified that the participant attended this activity/conference and that the activities listed are appropriate educational experiences which should be awarded the number of CEUs denoted above.

RID Approved Sponsor Signature Administrator: _____ Date: _____

The Participant must send documentation of attendance to the Sponsor upon completion of the activity. The Sponsor must file this form with RID online at www.rid.org within 45 days of the completion of the activity/conference.