

## CM Point Request Form – Category 4 Educational

For CM rules, process and definitions, see <http://www.abih.org/general/cmrequest.html>

<b>Activity Provider<sup>1</sup></b>	
<b>Activity Title</b>	
<b>Delivery Date(s)</b>	Offered multiple times – specify year: _____ <b>or</b> Start (mm/dd/yy) _____ to End _____
<b>Delivery Format</b> (See definitions on web site)	Physical Presence <input type="checkbox"/> Both Available <input type="checkbox"/> Distance Learning <input type="checkbox"/> Blended (requires use of both formats) <input type="checkbox"/>
<b>Physical Delivery Location</b>	Offered in multiple locations: Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Know <input type="checkbox"/> <b>or</b> City, State, Country: _____
<b>Activity Type</b>	Conference <input type="checkbox"/> or Course <input type="checkbox"/>
<b>Technical Contact Time<sup>2</sup></b>	(hrs) <b>or</b> Awarded CEUs: _____
<b>Free Activity</b> (any CIH can participate at no cost)	Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Know <input type="checkbox"/>
<b>Does the Activity include a section on "ethics"?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Know <input type="checkbox"/>
<b>Description<sup>3</sup></b>	See Attachment <input type="checkbox"/> URL (if needed): _____
<b>Previous CM Approval Number</b>	Content & length same as before: Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Know <input type="checkbox"/>
<b>Requested by</b>	AIHA Local Section <input type="checkbox"/> Government or Affiliated <input type="checkbox"/> Association/Council/Society <input type="checkbox"/> Professional Training Organization <input type="checkbox"/> CIH/CAIH <input type="checkbox"/> University <input type="checkbox"/> Company <input type="checkbox"/> Other (specify below) _____
<b>Your Name</b>	
<b>Address</b> to mail the approval letter	
<b>Phone</b>	
<b>Email</b>	

Submit **ONE TIME** via email (preferred), fax or postal mail:

Email: [cm@abih.org](mailto:cm@abih.org)

For questions, contact ABIH at 517-321-2638

ABIH  
6015 W. St. Joseph Hwy, Suite 102  
Lansing, MI 48917  
Fax: 517-321-4624

<sup>1</sup> Activity Provider = typically the org. that owns the source material. If not known, list the organization that sponsored the Activity.

<sup>2</sup> Technical Contact Time: 1 hr = 60 min of technical presentation. See <http://www.abih.org/general/cmrequest.html> for exclusions.

<sup>3</sup> Description: An outline, agenda, schedule, or syllabus showing subject matter content and length. Original documents, copies, scans and web links are acceptable. Web links must be specific. It is not necessary to submit the actual Activity learning materials (e.g. slides) or personal documents verifying completion.