

CONTINUING PROFESSIONAL COMPETENCY ACTIVITY LOG

LICENSEE'S NAME: _____ LICENSE NUMBER: _____

YEAR EARNED: _____

TOTAL PDHs EARNED: _____

Date:	
Sponsoring Organization Name:	
Instructor's/Speaker's Name:	
Location:	
Title or Specific Subject:	
Type of Activity:	
Duration:	
PDHs Earned:	
Indicate whether the specific activity is being claimed to satisfy the Ethics or Rules of Professional Conduct requirement (PE/PLS) or Standards of Practice for Land Surveying (PLS only) requirement [21 NCAC 56.1703] .	<input type="checkbox"/> Ethics or Rules of Professional Conduct <input type="checkbox"/> Standards of Practice for Land Surveying

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Sponsoring Organization Name:	
Instructor's/Speaker's Name:	
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Indicate whether the specific activity is being claimed to satisfy the Ethics or Rules of Professional Conduct requirement (PE/PLS) or Standards of Practice for Land Surveying (PLS only) requirement [21 NCAC 56.1703] .	<input type="checkbox"/> Ethics or Rules of Professional Conduct <input type="checkbox"/> Standards of Practice for Land Surveying

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