## Kansas Register of Deeds Certification Program Self-Report Form

This form must be submitted for each completed professional development activity that is not offered through Kansas State University or the Kansas Register of Deeds Association.

Completed form must be submitted within 90 days of the activity completion date.

## **Contact Information**

| Last Name               |   | First Name   |  | County                               |  |
|-------------------------|---|--|--|--------------------------------------|--|
| Address                 |   | City   | State  | Zip Code                             |  |
| Daytime Ph              | ione  | Email Address  |  |                                      |  |
| Current of              | f <b>fice held:</b> Regist  | er of Deeds Deputy Registe   | r of Deeds   —   Ot                                | her                                  |  |
| Program A               | Attended:   |  |  |                                      |  |
| Descriptio              | n of Program:   |  |  |                                      |  |
| Provider o              | of Program:   |  |  |                                      |  |
| Location:               |   | Date Offered:  |  |                                      |  |
| course you<br>KROD Educ | are submitting is not o   | t the Register of Deeds Certification v<br>n this list, you must submit the form<br>, 1100 Massachusetts St. #304, Lawre | website at <u>http://con</u><br>and required docum | entation for approval to Kent Brown, |  |
| For Kansas              | Register of Deeds Edu   | cation Committee Use:  |  |                                      |  |
| Number of               | hours approved:   |  |  |                                      |  |
| Approved I              | by:<br>Kent Brown, Chair,   | Education Committee  | _ Date appro                                       | ved:                                 |  |
| Attach the              |   | of the program agenda, certificate o<br>k for <b>\$30</b> , payable to Kansas State Ur                                   |  | ided), and registration form         |  |
| Send to:                | Kansas State Univer<br>Attn: KROD Certifica<br>010 Anderson Hall<br>919 Mid-Campus Dr | ntion  |  |                                      |  |

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