

Nevada State Board of Architecture, Interior Design and Residential Design

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Continuing Education Unit (CEU) Tracking Log

Name:

Registration No.:

Profession: OArchitect

○ Registered Interior Designer

OResidential Designer

License Expiration Date:

I am exempt from the continuing education requirement:

○ First-time registration (means the year you obtained your license and the next following year)

OPersonal hardship (please attach board approval letter)

Requirements per registration period:

- 8 units in technical and professional subjects relating to the safeguarding of life, health and property and promoting the public welfare
- 2 of the 8 units <u>must</u> be research and learning relevant to building code
- A maximum of 4 units may be self-directed educational activities
- A minimum of 4 units <u>must</u> be structured educational activities

Structured (Minimum 4 CEUs Required)		
Course Title/Description Instructor, Sponsor and Location	Code- Related CEUs	Total CEU Credits
PREVIOUS YEAR CARRYOVERS		
Self-Directed (Maximum 4 CEUs Allowed)		
TOTALS		
	Course Title/Description Instructor, Sponsor and Location PREVIOUS YEAR CARRYOVERS Self-Directed (Maximum 4 CEUs Allowed)	Course Title/Description Code-Related Instructor, Sponsor and Location CEUs Image: Course Title/Description Image: Ceurse Image: Ceurse Image: Ceurse <t< td=""></t<>

If more space is required to complete this log, please copy this page and submit additional sheets.

I wish to carry-over_____structured educational activity CEUs to the next registration year (maximum of 4 CEUs).

*** Do not send supporting documentation with this log unless you have been audited***

Registrants who are found to have reported false information regarding their continuing education activities may be subject to disciplinary action by the board, which may include administrative penalties and/or revocation of their registration. A copy of this form and supporting documentation should be kept for three years after the end of the registration period for which credit is claimed.

My signature below certifies that I have completed the above continuing education activities for the registration period described herein.

Printed Name