

**New Jersey Landscape Irrigation Contractors Examining Board
Continuing Education Credits (CEC) Submission Form**

Name		License Number	Date		Official Use Only Do Not Write	
Telephone Number		Email Address				
Mailing Address		City, State, Zip/Postal Code				
Company / Affiliation					Approved by:	
Company Mailing Address if different from above		City, State, Zip/Postal Code				
Date of Activity Month/Year	Sponsoring Organization Location (City, State)	Title / Description / Course Instructor	Instruction Hours	Number of CECs	Total	WC
Total						

I certify that I have completed the required Continuing Education Credit activities as reported on this form.

Signature: _____

Use multiple forms if necessary. You must attach copies of all course completion certificates and documentation of attendance at trade shows and meetings. Completed submission form(s) and supporting documentation can be sent to: liceb@dep.nj.gov or Landscape Irrigation Contractors Examining Board, c/o Department of Environmental Protection, Licensing and Pesticide Operations, PO Box 420, Mail Code 401-04E, Trenton, NJ 08625-0420