



Center for the Advancement of Jewish Education

REQUEST FOR PRE-APPROVAL OF PROFESSIONAL DEVELOPMENT HOURS

To receive credit, please submit this form 14 days in advance of enrollment. It is the responsibility of the individual requesting approval to be sure an official institution generated certificate of completion or an attendance sheet with printed names and signatures is submitted to the Center for the Advancement of Jewish Education.

Submitted by: _____

Phone: _____ E-mail: _____

Session / Course Title _____

Sponsoring Organization/ Institution _____

Date _____ :

Please attach course description to this form. Please note that 1 credit = 15 hours.

NOTE: NO RETROACTIVE CREDIT WILL BE GIVEN

Return via email to: OrlyLandau@caje-miami.org

Return via USPS to: CAJE, 4200 Biscayne Blvd., Miami, FL 33137-3210

For information call: (305) 576.4030 ext. 144

Teacher Signature: _____

Date: _____

FOR OFFICE USE ONLY: Date received: _____ Approval: Yes No

Number hours of credit granted: _____ Initialed _____