

Diocese of South Dakota
Annual Continuing Education Report
For the Year _____
(To be submitted to the Bishop by January 31 of each year.)

Name _____ Position _____

Address _____ City _____ zip _____

List the workshops, courses, independent study, etc. you completed to earn CEU credit in the following categories:

Religious Studies (Canonical areas)

Course Titles/Book Titles/Workshops, etc.	CEUs Earned

Professional

Course Titles/Book Titles/Workshops, etc.	CEUs Earned

Personal

Course Titles/Book Titles/Workshops, etc.	CEUs Earned