

# Louisiana Association of Self Insured Employers

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## Evidence of Continuing Education

**This form should be used if the course has not been pre-approved by LASIE.**

1. Course must relate to workers' comp.
2. Submit a form for each continuing education course (make additional copies if needed).
3. Attach evidence of attendance for each course (optional Certificate of Attendance form may be used) and a copy of an agenda or outline of the seminar material (not required if the course or seminar was sponsored by LASIE).

Course Name: \_\_\_\_\_

Course Date: \_\_\_\_\_

Location: \_\_\_\_\_

Sponsoring Organization: \_\_\_\_\_

Course Length: \_\_\_\_\_

Number of CE hours  
you are applying for: \_\_\_\_\_

Course Was Pre-Approved:  Yes  No

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

For Internal Use Only	
Date Received:	
Reviewed By:	
CE Hrs. Approved:	
Date Approved:	