

## Request for CLU Import

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

Employee Number: \_\_\_\_\_

School: \_\_\_\_\_

Type of Request:

\_\_\_\_\_ Regional or State Department Professional Development

\_\_\_\_\_ Independent national or state professional development provider

\_\_\_\_\_ University credit

\*Remember to attach certificate or letter of attendance. This document must contain the number of CLUs being awarded and the date of the activity. Agendas will not be accepted as proof of attendance.

Deadline for acceptance is 30 days after the event except for university credit which is 60 days.

Submit this letter and documentation to:

Debra Franklin  
McAuliffe Center  
12000 Goodwood Boulevard  
Baton Rouge, LA 70816

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For Office use only:

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

Action taken: \_\_\_\_\_

Recorded: \_\_\_\_\_ Denied: \_\_\_\_\_

Reason for denial:

\_\_\_\_\_  
\_\_\_\_\_