** Continuing Education Activity Plan**

**Instructor’s Form**

***Please Return as a Word Document***

This form is to be completed by the instructor and kept on file with the Sponsor form.

The RID Sponsor will submit the completed Activity Plan online at least 30 days in advance of the activity.

RID Sponsor Name: ICRID, RID Sponsor Administrator, Laura Leffler

Presenter/Instructor Name (**Please attach bio/resume**):

Date(s) Time of Activity:

# of CEUS: ❑ PS ❑GS

Title of Activity:

Level of Participant’s Prior Knowledge of Topic:

□ Little/None □ Some □ Extensive □ Teaching

Target Audience:

Workshop/Course Description:

Educational Objectives (List specific measurable actions by participants that will demonstrate comprehension and integration of information presented):

Participants will:

Media/Materials (List the print, audio and visual materials you will use. Who is responsible for providing them?)

Evaluation & Assessment (Describe how you will evaluate student learning & presentation effectiveness.)