

**WEST VIRGINIA UNIVERSITY**  
APPLICATION & APPROVAL FOR A  
PROFESSIONAL DEVELOPMENT HOURS (PDH) PROGRAM

Requesting Unit: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Program Titles: \_\_\_\_\_

***Please attach a Syllabus or Overview showing Learning Outcomes & Assessment***

Program Dates:      From: \_\_\_\_\_ To: \_\_\_\_\_

Instructor's Name: \_\_\_\_\_

Instructional Format: \_\_\_\_\_

Attendance/Passing Requirements for Awarding PDH's: \_\_\_\_\_

Sponsoring Unit: \_\_\_\_\_

Course Title: \_\_\_\_\_

Instructional or Contact Hours: \_\_\_\_\_

Anticipated Number of Attendees: \_\_\_\_\_

Submitted by: \_\_\_\_\_ Date \_\_\_\_\_

Email Address: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date \_\_\_\_\_

This application has been approved for \_\_\_\_\_ PDH's to participants completing program requirements.

Return to:  
WVU Continuing & Professional Education  
Attn: Sherry Gallagher  
P O Box 6800  
Morgantown WV 26506-6800  
Phone: 304-293-7570  
Fax: 304-293-4899