



**American Polygraph Association**  
**Professional Development Committee**  
**Request for CEH Approval**

**Note: All requests are due at least 30 days prior to the start date of the training.**

<b>Start Date:</b>				
<b>End Date:</b>				
<b>Total Instruction Hours:</b>				
<b>Person Requesting:</b>				
<b>Organization Name (if applicable):</b>				
<b>Location of Training:</b>				
Check box to acknowledge course outline or syllabus accompanies this form.			-	
Check box to acknowledge a short biography of the principle instructor(s) accompanies this form. <i>(Once you click the box, you will be taken to the next page.)</i>			-	
<b>Go to Next Page →</b>				
<b>***** For Office Use Only *****</b>				
Approved by PDC:	Yes:	-	No:	-
Date:				
(PDC) Signature:				

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Return form and additional documents to [manager@apapolygraph.org](mailto:manager@apapolygraph.org).

**Please list all principle instructors, each instructor's topic(s), and the number of hours for each topic:**