

# CPE APPROVAL REQUEST FORM

ALABAMA STATE BOARD OF PUBLIC ACCOUNTANCY  
PO Box 300375  
Montgomery AL 36130-0375  
334-242-5700 • www.asbpa.alabama.gov

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**PLEASE REVIEW NEWLY UPDATED CPE RULES ON THE BOARD'S WEBSITE.**

*If writing by hand, please print legibly.*

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## 1. YOUR NAME AND CONTACT INFORMATION:

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

Firm/Company Name: \_\_\_\_\_

Preferred phone: \_\_\_\_\_ Email: \_\_\_\_\_

Are You Sponsor Representative? \_\_\_\_\_ OR Are You an Attendee? \_\_\_\_\_

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## 2. CPE COURSE INFORMATION:

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

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

Course Date(s): \_\_\_\_\_

Course Location: \_\_\_\_\_  
*City State*

*If Multiple date/locations, please list or explain:*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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## 3. CHECK LIST:

- I have attached an agenda or outline for this course that includes both **topics** and **times** of instruction and breaks. \_\_\_\_\_
- I have attached a bio for each instructor. \_\_\_\_\_
- I understand that for a course to be an approved CPE course, there must be CPAs in attendance. \_\_\_\_\_

**NOTE:** PowerPoint presentations and other course materials may also be submitted in addition to an agenda.