



Rhythmic Program Judging Continuing Professional Education Record

Name: _____ USA Gym Membership # _____

Year: November 1st, 20__ - October 31st, 20__ Highest Rating Held as of December 31st _____

Highest Rating Held	Total CPE credits needed per accreditation year	Minimum # of CLINIC CPE credits required as part of the yearly total	Maximum # of CLINIC credits allowed to carry forward to the next accreditation year after the annual total has been met
Level 3-6	12	6	2
L7/8; National/Brevet	20	10	4

See the Rhythmic Rules & Policies: Chapter 4 – Officials for a full list of CPE Credit Options and CPE Regulations

Date	CPE Activity	# of Credits Earned	Instructor/Mentor Signature <i>(N/A for online courses – save certificate)</i>	Carry-over clinic hours
YEARLY TOTAL CREDITS			CLINIC CREDITS TO CARRY OVER	

This form must be completed and sent to your Regional Judging Coordinator by November 1st each year. Please use the back side of the record form if additional rows are needed.

