

Georgia Department of Agriculture Certified Animal Feeding Operator/Planner Request for Pre-Approval of Continuing Education Course(s)

IN	lame				
T:	itle and Organization				
M	failing Address				
C	'ity	County	State	Zip	
	hereby submit the follow Certification:	wing for approval as Conti	inuing Education credit for	Animal Feeding Operator/	Planner
Sı	ubject (Title)				
T	ype Animals: Swine	Dairy Co	ommercial Layer	Poultry (dry litter)]
D	Description (brief)				
In	nstructor(s)		Agency, Compan	v. etc	
	Method of Presentation: I		Tideo On-Farm Ac		
•					
L	ength (in hours)	Event and	Location		
	Submitte	ed by		Date	
		Georgia Der	partment of Agriculture Use O	only	
	Subject Approved	Yes No No	Method A		No 🔲
	Instructor Approved	Yes No	#CE Hou	rs Approved	
	Approved by :		Title :	Date :	

Mail this completed form to: Georgia Department of Agriculture 19 Martin Luther King Jr Drive SW Room 112 – CAFO Atlanta, Georgia 30334 (404) 656 – 3665