



CONTINUING EDUCATION APPROVAL REQUEST FORM

BOARD OF RADIOLOGIC TECHNOLOGISTS
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INSTRUCTIONS: Submit this form along with an outline, agenda, brochure, or syllabus that shows the times and content of the course. A short vita or resume of the presenters is requested. Please enter all information, including sponsor, and sponsor contact information.

NAME OF REQUESTOR:
NAME OF CONTACT PERSON: PHONE NO.
EMAIL:
PROGRAM NAME:
SPONSOR:
ADDRESS:
WEB SITE:
LOCATION OF PROGRAM _____ DATE(S) OF PROGRAM

SUBMITTAL INSTRUCTIONS:

Please submit this form with the (1) Course Agenda, (2) Course Brochure, and (3) Resume of Presenter.

Your request will be mailed to the Continuing Education Committee of the Board of Radiologic Technologists for consideration. Go to www.radiology.mt.gov and select Regulations and Administrative Rules, including [ARM 24.204.2101 Continuing Education](#).