



CONNECTICUT ASSOCIATION FOR
Marriage & Family Therapy

Certificate of Continuing Education Credit

“Title of the Presentation”
Name of Presenter, Credentials

This Certificate is Awarded to:

*This program has been approved for **X** Continuing Education Hours by the Connecticut Association for Marriage and Family Therapy and meets the continuing education criteria for Marriage and Family Therapist Licensure renewal.*

Held at *Location*
Date, year

Signature of Authorized Representative

Date

CEU approval #0000