



CPE CREDIT REQUEST FORM

Webinar Evaluation

To be completed by Certified Public Accountants (CPAs) only



Course Title: Overcoming Hiring and Retention Hurdles in Today's Complex Labor Market

Course Date: 05/16/2024

Course Code: 240516PL

For FPC/PPP recertification credit hours (RCHs), DO NOT complete this form. RCHs for PAYO webinars will be reflected on the online recertification log automatically.

For **CERTIFIED PUBLIC ACCOUNTANTS (CPAs) ONLY**: Participation and attendance reporting is the basis for determining whether Continuing Professional Education (CPE) credits will be issued for participation in educational events. NASBA requires that attendees seeking CPE credits must account for all time attended in educational offerings, along with submission of a course evaluation. PayrollOrg will verify attendance, attentiveness and responses to polls and Q&A sessions before awarding a certificate.

At the end of the event, complete and submit this Evaluation Form within **30 DAYS**. Email the completed evaluation form to certification@payroll.org with "CPE Evaluation Form" in the subject line. CPE certificates will be issued 6 - 8 weeks following the event. Incomplete evaluation forms will NOT be accepted.

EVALUATION QUESTIONS	Strongly Disagree	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree	Strongly Agree
Were the stated learning objectives met?							
If applicable, were the prerequisites appropriate and sufficient?							
Were program materials, including the qualified assessment, if any, relevant and did they contribute to the achievement of the learning objectives?							
Was the time allotted to the learning activity appropriate?							
Were the individual instructors effective?							

I certify that I attended and actively participated in this Group Internet Based event. I understand that PayrollOrg will issue a CPE credit certificate based on the following five elements: (1) answers to polls presented, (2) participation in Q&A sessions, (3) duration of recorded time, (4) attentiveness during training and (5) completeness of this evaluation form.

Attendee First and Last Name (Please PRINT): _____

Attendee Signature: _____ Date Signed: _____

Please provide any comments below to help us improve our event.
