



*The Center for Professional Excellence*

## CPE SESSION REQUEST FORM

### **IMPORTANT NOTE**

All CPE Session requests, formerly TLC Session requests, should be submitted to the [CPE mailbox](#) more than 10 calendar days — but less than a calendar year — from the date of request. Any expectations must be approved by The Center for Professional Excellence.

### **Session Details:**

**Date of request:**

**Title of Session:**

**Session Date (s):**

- Additional Dates:

**Duration of Session:** FROM: TO:

**Contact person for session details:**

- Contact phone:
- Contact email:

**Location:**

**Capacity:**

**Description of Session:**

**EMAIL COMPLETED REQUEST FORM TO CPE MAILBOX AT [THECPE@WINTHROP.EDU](mailto:THECPE@WINTHROP.EDU)**

**ALLOW 1-3 CALENDAR DAYS FOR US TO ADD YOUR SESSION TO CPE REGISTRATION CALENDAR.**

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