



LOUISIANA PROFESSIONAL ENGINEERING AND LAND SURVEYING BOARD

# CPD Sponsor/Provider Contact Information Update Form

To change the name of your CPD Sponsor/Provider you must complete & submit a new "Continuing Professional Development (CPD) Sponsor/Provider Application" [click here](#)

Date of Request:

CPD Sponsor/Provider Name:

CPD Certification #:

Contact Person:

Email Address:

Website Address:

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Preferred **Public** Address:

**Street Address:**

City:

State:

Zip:

Country:

Phone:

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Preferred **Mailing** Address:

**Street Address:**

City:

State:

Zip:

Country:

Phone:

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I certify that the information above is true and correct.

\_\_\_\_\_  
\*Signature and Title

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

*\*If you are unable to create an electronic signature after the form is complete, please print, sign and email the form to [holly@lapels.com](mailto:holly@lapels.com)  
Upon completion, click the submit button below and the form will be transmitted via email to LAPELS.*