

2016 AIA/CES Conference Session Participation Form (C-1)
 DO NOT SEND THIS FORM DIRECTLY TO CES RECORDS — RETURN TO CONFERENCE STAFF! PLEASE FILL IN YOUR NAME AND AIA NUMBER



Participant Name:

Participant Email Address:

Provider Name: **AIA MICHIGAN**

Provider Number: **A056**

Conference: 2016 Docomomo Conference

Program Dates: June 9-11, 2016

Program Location: Detroit, MI

AIA Member #: _____
Request Certificate: Yes _____ No _____

Attended	Session #	Program Title	LU Hours	HSW
Yes <input type="checkbox"/> No <input type="checkbox"/>	Doco1/16	Michigan Modern: Design that Spread America Thursday – 6:15PM – 7:15PM	1 LU	
Yes <input type="checkbox"/> No <input type="checkbox"/>	Doco2/16	Why Save New Formalism Friday - 8:30AM – 9:45AM	1.25 LU	
Yes <input type="checkbox"/> No <input type="checkbox"/>	Doco3/16	Urban Renewal as Heritage Friday – 10:00AM – 11:15AM		1.25 HSW
Yes <input type="checkbox"/> No <input type="checkbox"/>	Doco4/16	Beyond Modernism? A debate Friday – 1:00PM-2:15PM	1.25 LU	
Yes <input type="checkbox"/> No <input type="checkbox"/>	Doco5/15	General Motors Technical Center Tour Friday		3 HSW
Yes <input type="checkbox"/> No <input type="checkbox"/>	Doco6/16	Yamasaki in the Cultural Center Tour Friday		2 HSW
Yes <input type="checkbox"/> No <input type="checkbox"/>	Doco7/16	Downtown Detroit's Modernist Architecture Tour Saturday		2.5 HSW
Yes <input type="checkbox"/> No <input type="checkbox"/>	Doco8/16	Grosse Pointe Modern Masterpieces Tour Saturday		3 HSW
Yes <input type="checkbox"/> No <input type="checkbox"/>	Doco9/16	Mid Century Explodes in Southfield Tour Saturday		3 HSW
Yes <input type="checkbox"/> No <input type="checkbox"/>	Doco10/16	Lafayette Park Tour Saturday		2 HSW
Yes <input type="checkbox"/> No <input type="checkbox"/>	Doco11/16	Mid Century Modern Mecca Tour Sunday		4 HSW
Yes <input type="checkbox"/> No <input type="checkbox"/>	Doco12/16	Cranbrook Modern to Contemporary Tour		4 HSW
		Total Hours Attended:		

I hereby certify that the above information is true and accurate to the best of my knowledge and that I have complied with the AIA Continuing Education Guidelines for the reported activities.

ATTENDEE SIGNATURE (*Credit will not be awarded without signature.*)

DATE

Participants: Complete and return this form to: Staff