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| **2021 ICC/CES Program Completion**Course participants are responsible for reporting to the ICC/CES program a certificate verifying completion.The certificate will be forwarded to the participant by the education provider within a reasonable time period after the course is completed.This form is used to report each participant to the education provider. |  |

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| Program Title (as registered with the ICC/CES Education Provider Program)**Fire Door Systems, A Guide to Code Compliance** | Education Provider Name**McKEON** | Class Hours (1, 2, 3, 4 or 5)3 |
| Name of person submitting this report: David Dodge |
| Phone Number: 801-471-7210 | Email: ddodge@mckeondoor.com |
| Date of Program Completion:  | City/State:  |
| Participants at this program **(Please print or type)** |
| ICC MemberYes or No | Jurisdiction | Name of Participant | Certificate\* RequestYes or No |
| 1. Yes No |  |  | Yes No |
| 2. Yes No |  |  | Yes No |
| 3. Yes No |  |  | Yes No |
| 4. Yes No |  |  | Yes No |
| 5. Yes No |  |  | Yes No |
| 6. Yes No |  |  | Yes No |
| 7. Yes No |  |  | Yes No |
| 8. Yes No |  |  | Yes No |
| 9. Yes No |  |  | Yes No |
| 10. Yes No |  |  | Yes No |
| 11. Yes No |  |  | Yes No |
| 12. Yes No |  |  | Yes No |
| 13. Yes No |  |  | Yes No |
| 14. Yes No |  |  | Yes No |
| 15. Yes No |  |  | Yes No |
| 16. Yes No |  |  | Yes No |
| 17. Yes No |  |  | Yes No |
| **Return this form within two weeks of program completion to: McKEON 44 Sawgrass Drive, Bellport, NY 11713****Phone: 800-266-9392 Fax: 631-803-3030 or Email to** **triley@mckeondoor.com****\*It is the responsibility of the Education Provider to send out certificates of completion to all participants that request them.** |