

**Department of Commerce, Community and Economic Development**  
**Division of Corporations, Business and Professional Licensing**  
**Board of Chiropractic Examiners**  
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 Email: [BoardOfChiropracticExaminers@Alaska.Gov](mailto:BoardOfChiropracticExaminers@Alaska.Gov)  
 Website: [ProfessionalLicense.Alaska.Gov/BoardOfChiropracticExaminers](http://ProfessionalLicense.Alaska.Gov/BoardOfChiropracticExaminers)

## Continuing Education Activity Log

**Note:** This is not to be submitted to the board for renewal of your license. This form is being provided for your personal records only.

<b>Full Legal Name:</b>		<b>AK License Number (if known):</b>		<input type="checkbox"/> <i>Application in Process</i>	
<b>Renewal Period:</b>					
Dates of Attendance	Course/Program Title	Course Provider	AK Course Number	Online (Y/N)	Hours Earned
<b>Total Hours of Continuing Education:</b>					