



CERTIFICATE OF ATTENDANCE

This is to confirm the attendance of _____ at the following continuing competency session:

COURSE TITLE: _____

PRESENTER'S NAME: _____

PRESENTER'S QUALIFICATIONS: _____

DATE: _____

TIME (start and end time): _____

LENGTH OF PRESENTATION: _____

LOCATION: _____

CONTINUING COMPETENCY CATEGORY: _____

SIGNATURE: _____

OFFICIAL CAPACITY: _____