Commission on Dietetic Registration	Continuing Profess	ional Education Certificate of Attendance - Attendee Copy-
Academy of Nutrition	Participant Name:	
	Registration Number:	Provider Code:
	Provider Name:	
	Activity Title:	
	Activity Number:	
	Date Completed:	Number of CPEUs Awarded:
	*Performance Indicator(s):	CPE Level:
Provider Signature		RETAIN ORIGINAL COPY FOR YOUR RECORDS *Refer to your Professional Development Portfolio Guide ForPIs

Commission on Dietetic Registration	Continuing Profes	sional Education Certificate of Attendance - Licensure Copy-	
Academy of Nutrition and Dietetics	Participant Name:		
	Registration Number:	Provider Code:	
	Provider Name:		
	Activity Title:		
	Activity Number:		
	Date Completed:	Number of CPEUs Awarded:	
	*Performance Indicator(s):	CPE Level:	
Stofe		RETAIN ORIGINAL COPY FOR YOUR RECORDS	
Provider Signature		 *Refer to your Professional Development Portfolio Guide For PIs 	