| Commission<br>on Dietetic<br>Registration    | Continuing Professi        | onal Education Certificate of Attendance<br>- Attendee Copy-   |
|--|----------------------------|--|
| Academy of Nutrition<br>right. 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:   |
| Lorna O'Connell                              |                            |  |
| Provider Signature                           |                            | *Refer to your Professional Development Portfolio Guide ForPIs |

| Commission<br>on Dietetic<br>Registration    | Continuing Professional Education Certificate of Attendance<br>- Licensure Copy- |   |
|--|--|---|
| Academy of Nutrition<br>right. 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:  |
| Lorna O'Connell                              |  | RETAIN ORIGINAL COPY FOR YOUR RECORDS - *Refer to your Professional Development Portfolio Guide For PIs |
| Provider Signature                           |  |   |