# Continuing Education Attendance Form

## National Environmental Health Association

**FOR NEHA USE ONLY**

Name of Program: Pulling All the Behavior Change Ideas Together  
Location: webinar  
Dates: October 4, 2018  
Total Number of NEHA Authorized CE Contact Hours: 1.0

## STEP 1. Name and Address of Applicant

| Name: ____________________________________________ | Date Completed Training ____________________________ |
| Address: ______________________________________________________________________________________ |
| City: ____________________________________________ | State: ____________________________________________ | Zip: ____________________________________________ |
| Daytime Phone: ___________________________________ | Email: ____________________________________________ |

NEHA Membership Number (if applicable): ____________________________________________  
NEHA Credential ID Number (if applicable): ____________________________________________

## STEP 2. Competencies

Please list the new competencies you have developed.

-  
-  
-  
-  

## STEP 3. Total CE Hours

| Number of Hours attended: ________________________ | (-) Breaks/Lunches: - ________________________ |
| (-) Dinners: - ________________________ | (-) Business Meetings - ________________________ |
| Total CE Hours: = ________________________ |

## Step 4. Attendance Verification

(Representative from Pre-Approved CE Program, please sign below)

ATTENDANCE VERIFICATION SIGNATURE: __________________________  
Executive Director, Partnership for Food Safety Education

## Step 5. CE Fees

- [ ] I am credentialed with NEHA, there is no charge (please see other side of form for submission instructions)  
- [ ] I am not currently credentialed with NEHA, there is a $7.50 charge per CE Submission (please see other side of form for submission instructions)

**Method of Payment (if applicable):**

- [ ] Check or Money Order payable to NEHA  
- [ ] Visa or Mastercard  
  
  Card Number: __________________________  
  CVV Code: __________________________  
  Exp. Date: __________________________

Authorized Signature: __________________________
Step 6. Submission Instructions

1. If you are credentialed with NEHA:
   ✓ Please submit your continuing education online using the CE online Submission process at: http://www.neha.org/CEweb/CE.asp
   ✓ Log in with your last name and NEHA Credential ID Number
   ✓ Complete the online submission form
   ✓ Retain this form for your records. In the event you are audited this form will serve as your proof of attendance.

2. If you are currently not credentialed with NEHA:
   ✓ Please submit this completed form along with the appropriate fee ($7.50 per submission) to:

   National Environmental Health Association
   Attn: Continuing Education
   720 S. Colorado Blvd., Ste. 1000-N
   Denver, CO 80246
   Phone: (303) 756-9090 ext. 310
   Fax: (303) 691-9490
   Email: credentialing@neha.org