**Continuing Education Attendance Form**

**National Environmental Health Association**

**ALL STEPS MUST BE COMPLETED**

**FOR NEHA USE ONLY**

Name of Program: Thanksgiving: Your Food Safety Overview  
Location: Online  Dates: October 30, 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.

expr

expr

expr

**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:  ___________________________  Exp. Date:  ___________________________

CVV Code:  _______________

Authorized Signature:  

__________________________________________
Step 6. Submission Instructions

1. If you are credentialed with NEHA:
   ✓ Log into your My NEHA account using your email address as your login ID.
   ✓ On the right side of the screen, look for "My Credentials and CEs". Then click on "Report CE Credits".
   ✓ Complete the Self-Report CE Credits 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