Name: ____________________________________________   SWANA Identification # _______________________

Organization: _________________________________________ Email: ________________________________

Wk Phone: (__________________________) Alt Ph: (__________________________) 

SWANA Certification Currently Held: ________________________________________________________________

Obtain a signature from the representative at the end of the event. Only a representative of this session may sign this form to confirm attendance. The signature is mandatory.

YOU MUST ATTEND THE COMPLETE EVENT TO RECEIVE TOTAL POSSIBLE CEUs

<table>
<thead>
<tr>
<th>May 21, 2019</th>
<th>CEUs</th>
<th>Representative’s Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Event Sessions</td>
<td>3</td>
<td></td>
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</tbody>
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For SWANA Certified Professionals: Fax (301.585.0297) or email (certification@swana.org) this completed form to the Certification Group. If you have any questions email certification@swana.org. Allow 2 weeks for processing of CEUs.

Training@Work Program – Staff can't get away for training? Have a SWANA instructor train your staff at your workplace with a Training@Work package! For a complete listing of Training@Work courses and descriptions, visit SWANA Training@Work.

IMPORTANT - PLEASE READ

Many states/provinces recognize SWANA as an approved training and continuing education provider. Attendance at SWANA national or chapter training does not guarantee credits will be accepted by your state/provincial certifying board. Your state/province may grant credits differently than the SWANA CEUs distributed for the event. **It is important to consult your state/provincial certification board for details and any required approval prior to training.** You are responsible for 30 hours of continuing education during your three-year certification.