

Continuing Education Certificate of Completion National Environmental Health Association

Name of Program: First We Wash Our Hands: Global Handwashing Day Event	
Location: Online Webinar D	Dates: 10/15/2019
Total Number of NEHA Authorized CE Contact Hours: 1.0	
STEP 1. Name and Address of Attendee	
Name:	Date Completed Training
Address:	
City: Sta	ate: 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: =1
Step 4. Completion Verification (Representative from Pre-Approved CE Program, please sign below)	
SIGNATURE: Kecutive Director, Partnership for Food Safety Education	
Step 5. 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: ✓ Retain this form for your records. This form will serve as your proof of attendance. 	