

## Continuing Education Certificate of Completion National Environmental Health Association

Name of Program: Winner Winner, Family Dinner!	
Location: Online Dates: 9/9/2020	
Total Number of NEHA Authorized CE Contact Hours: 1	
STEP 1. Name and Address of Attendee	
Name:	Date Completed Training
Address:	
City: State:	Zip:
Daytime Phone: Email:	
NEHA Membership Number (if applicable):	
NEHA Credential ID Number (if applicable):	
<b>STEP 2. Competencies</b> 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. Completion Verification (Representative from Pre-Approved CE Program, please sign below)	
SIGNATURE: Signature Executive Director, Partnership for Food Safety Education	
Step 5. Submission Instructions	
<ul> <li>1. If you are credentialed with NEHA:</li> <li>✓ Log into your My NEHA account using your email address as your login ID.</li> <li>✓ On the right side of the screen, look for " My Credentials and CEs". Then click on "Report CE Credits".</li> <li>✓ 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.</li> <li>2. If you are currently not credentialed with NEHA:</li> <li>✓ Retain this form for your records. This form will serve as your proof of attendance.</li> </ul>	