Alabama Department of Public Health

Bureau of Professional and Support Services

Program Attendance

Zika Virus: Information for Clinicians

ASNA Activity Number: 5-91.16.15

Original Broadcast: 3/17/2016

Contact hours for this program not available after: 3/31/2017

Name of Participant (<u>PRINT</u> clearly)	Discipline (RN, SW, RD, etc.)	License Number	Address Only Required if CE Certificate is to be Mailed
	Name of Participant (<u>PRINT</u> clearly)	Name of Participant (PRINT clearly) Discipline (RN, SW, RD, etc.) Image: Strategy of the strat	Name of Participant (PRINT clearly) Discipline (RN, SW, RD, etc.) License Number Image: Stress of the s

ADPH Staff: Return to the County/Area Site Facilitator.

Site Facilitator: Send completed Program Attendance Sheets and Evaluation Summary to: Bureau of Professional and Support Services, Suite 1040, Alabama Department of Public Health, PO Box 303017, Montgomery, AL 36130-3017. DO NOT FAX.

Retired ADPH Participants: FAXES NOT ACCEPTED. Send completed sign-in sheet and evaluation to above address. Allow <u>four weeks</u> for CE Certificate to be mailed. You must include "retired ADPH employee" and the date of retirement.

Non-ADPH and Out-of-State Participants: FAXES NOT ACCEPTED. Send completed sign-in sheet and evaluation to above address. Allow <u>four weeks</u> for CE Certificate to be mailed. Enclose a check for \$17.50 for <u>each</u> person who wants nursing or social work CE credit. Check should be made out to the Alabama Public Health Association. Charge for replacement certificates is \$5.50.