

Do Not Staple

**Alabama Department of Public Health
Bureau of Professional and Support Services**

Feet, Forks, and the Fate of Our Families

ASNA Activity Number: 5-91.15.24

Original Broadcast: April 21, 2015

Contact hours for this program not available after: April 30, 2016

THIS SECTION MUST BE COMPLETED FOR CE TO BE AWARDED

Site Facilitator: _____ Location (**city and state** where program was viewed): _____

Agency or County Health Dept (**no abbreviations**): _____

Date Viewed	Name of Participant (<u>PRINT</u> clearly)	Discipline (RN, SW, RD, etc.)	License Number	Address Home or Business

ADPH 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 four weeks for CE Certificate to be mailed. Please write "retired employee" and the date of retirement on this form.
Non-ADPH and Out-of-State Participants: FAXES NOT ACCEPTED. Send completed sign-in sheet and evaluation to above address. Allow four weeks for CE Certificate to be mailed. Enclose a check for \$17.50 for each 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.