

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

**Satellite or Webcast Program Attendance Sheet**

***New Cervical Cancer Screening Guidelines: The Rationale***

ASNA Activity No: 5-91.807

Continuing Education for this Program not Available After: 09/30/2013

**THIS SECTION MUST BE COMPLETED FOR CNE TO BE AWARDED**

Date Viewed: \_\_\_\_\_ Location (city and state where program was viewed): \_\_\_\_\_

Viewing Method (circle one): Day of Program or On-Demand Webcast Site Facilitator: \_\_\_\_\_

<b>PARTICIPANT'S NAME</b> as it appears on the Professional License (please <b>PRINT</b> clearly)	<b>DISCIPLINE</b> (RN, SW, RD, etc., <b>NOT</b> Job Title)	<b>LICENSE NUMBER</b>	<b>AGENCY</b> <b><u>NO ABBREVIATIONS</u></b>	<b>ADDRESS</b>

**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.**

**Non-ADPH Alabama Participants:** **FAXES NOT ACCEPTED.** Send completed sign-in sheet and evaluation to above address.

**Out-of-State Participants:** **FAXES NOT ACCEPTED.** Send completed sign-in sheet and evaluation to above address. Allow four weeks for CNE Certificate to be mailed.