

**Commission
on Dietetic
Registration**



the credentialing agency for the
Academy of Nutrition
and Dietetics



Provider Signature

**Continuing Professional Education Certificate of Attendance
-Attendee Copy-**

Participant Name: _____

Registration Number: _____

Activity Title: The Nutrition School - Nutritious Life Certification

Activity Number: 127183

Date Completed: _____ Number of CPEUs Awarded: 12

*Learning Need Code(s): _____ CPE Level: 1

RETAIN ORIGINAL COPY FOR YOUR RECORDS

**Refer to your Professional Development Portfolio Learning Needs Assessment Form (Step 2)*

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