

EDAC Certified Individuals, please retain this copy for your records in case you are selected for an audit.
You will need this to submit courses through Meazure Learning (formerly Scantron) when you are
due for renewal.

For questions about CEUs, you may contact EDAC at edac@healthdesign.org

Participant Name: _____ EDAC ID #: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Country: _____

Provider: *Webinars/Online Learning*

Program Date(s): September 21, 2023

EDAC Course Number (if pre-approved)	Course Title	CEU Hour(s)
I23-21B-ICONS	Finding the Evidence — Nursing Home Research that Measures Impacts and Change	1.0
Please list 4 key points from this course:		
1.		
2.		
3.		
4.		

I hereby certify that the above information is true and accurate to the best of my knowledge and that I have complied with the EDAC Continuing Education Guidelines.

SIGNATURE: _____ DATE: _____