**CERTIFICATE OF ATTENDANCE**

This is to certify that

**<First Name, Last Name>**

Has participated in the following Program:

|  |
| --- |
| ***<Program Title>*** |
| **Organized by:** | <*Supporting Organization ie: Hospital or LEG*> |
| **SPC Chair:** | <*Program Director listed on application>* |
| **Cert+ Session ID#:** | *<CFPC Program ID# listed on approval letter - does not apply to RCPSC>* |
| **Session Date(s):** | <*Date range as it relates to Cert+ session ID, found in Approval Letter>* |
| **Host Location**: | e.g. Sudbury, ON / Webcast / OTN  |

**Insert Credit Statement(s) here (as found in Accreditation/ Certification Statements Document)**