**CERTIFICATE OF ATTENDANCE**

*This is to certify that*

**[Participant’s Name]**

*Participated in*

[Activity Name]

Presented by: [Presenter Name(s)]

On [Activity Date/Beginning and End Times]

and earned [XX] [PS or GS] CEUs [XX contact hours]

Activity Code [0051 XXXX XX]

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*L. Leffler, RID Sponsor Administrator*

*The Indiana Chapter of RID, ICRID, is an RID Approved Sponsor*

*02.27.2022 LL*