

# Urban Indians: Reducing the Risk of Diabetes and Heart Disease

## Instructions for Evaluating the Webinar and Requesting Continuing Education Credit

Your feedback is important to the Planning Committee and helps us continue to create a training program that meets your needs. It also allows us to consider new opportunities and content that adds value for participants.

If you wish to receive Continuing Education Contact Hours (CECH), you **must** complete the necessary forms, and **turn in** your documentation with payment to the National SOPHE office.

1. Complete and sign the evaluation form. You **must answer all questions** to receive credit.
2. Mark the Participation Record indicating your attendance by placing an X in the box on the matrix next to the session title. Total the number of credits you earned in the column labeled "CECH" and write it in as the total credits for which you are applying.
3. To receive credit, complete and sign the Continuing Education Form.
4. CECH Fees are applicable. The fee for this event (1.0 credit hour) is: \$7.00 for National SOPHE members, \$14.00 for non-members. Checks or credit card (Visa, MasterCard, or Discover) payments will be accepted. **Checks should be made payable to SOPHE.**
5. Mail or fax (preferred) the required items to:

SOPHE  
Attn: **Urban Indians: Reducing the Risk of Diabetes and Heart Disease**  
10 G Street NE; Suite 605  
Washington, DC 20002  
**(202) 408-9804 (202) 408-9815 FAX**

Title: Urban Indians: Reducing the Risk of Diabetes and Heart Disease

Date: September 20, 2011

**Continuing Education Form and Participation Record**

Event # 01-190DL

If you are applying for Continuing Education Contact Hours (CECH) **you must complete this entire form and print and sign your name on the bottom of the overall evaluation form.**

The following information is **REQUIRED** for ALL participants requesting Continuing Education Contact Hours for Entry-level (CHES) or Advanced-level (MCHES) (**please print:**):

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

CHES # \_\_\_\_\_ OR MCHES # \_\_\_\_\_

Address \_\_\_\_\_

City, State and Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Credit Card Payment Information:**

Cardholder Name *(if different from above)*: \_\_\_\_\_

Billing Address *(if different from above)*: \_\_\_\_\_

City, State and Zip *(if different from above)*: \_\_\_\_\_

Method of Payment:  Visa  MasterCard  Discover

Credit Card Number: \_\_\_\_\_ Expiration Date \_\_\_\_\_

Signature of Cardholder: \_\_\_\_\_ Total: \$ \_\_\_\_\_

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Title: Urban Indians: Reducing the Risk of Diabetes and Heart Disease

X	(indicate participation by placing an "X" next to the session titles)	Time	Entry <u>Advanced</u> CECH	
			0.0	1.0
<b>Tuesday, September 20, 2011</b>		4:00 – 5:00 pm	0.0	1.0
	Welcome/Introductions <b>Moderator's Name:</b> Nicolette Warren, MS, MCHES			
	Overview of REACH CEED Project <b>Presenter's Name:</b> Tim Noe, PhD			
	Honoring the Gift of Heart Health <b>Presenter's Name:</b> Carme Hamilton, RN, CDE			
	BRAID: Being Responsible American Indians with Diabetes <b>Presenter's Name:</b> Catherine Waller, RD, LD, CDE			
<b>Total Number of Hours Requested for sessions attended (Participant to Complete)</b>				
			(Note: Round to nearest .25)	