APPENDIX C



National Association of Pediatric Nurse Practitioners (NAPNAP-A10)

40 Exchange Place, Ste. 1902• New York, NY 10005 Phone: 877-662-7627 • Email: info@napnap.org

By awarding the certificate, providers assure that the participant has successfully achieved the continuing education objectives of the program.

Name:				
□ National NAPNAP Member N	umber: □	Nonmember:	RN State:	License Number:
Address:				
City:	State:	Zip:		
Program Title:				
Program Date(s)/Date Comple	ted:			
Program Location (Facility, Ci	ty, State):			
Awarding Institution: NAPNAP 40 Exchange Place, Suite 1902 New York, NY 10005	Provider Informa Provider Name Provider Addres		Chapter/Agency/Progr	am #:

This program is accredited for X.X NAPNAP CE contact hours of which X.X contain pharmacology content, per the National Association of Pediatric Nurse Practitioners Continuing Education Guidelines.



Chapter Education Chair

KEEP THIS CERTIFICATE FOR YOUR RECORDS FOR SIX (6) YEARS. Request for duplicate certificates should be made to NAPNAP.

NAPNAP is approved as a provider of nursing continuing education by the Florida Department of Health, Division of Quality Assurance, BON Accreditation (CE Provider #: 50-8626). NAPNAP is approved as provider by the California Board of Registered Nursing, Provider Number CEP 16770.