

APPENDIX C2



**National Association of
Pediatric Nurse PractitionersSM**

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

Faculty Participation Certificate

Name: _____

☐ **National NAPNAP Member Number:** _____ ☐ **Nonmember:** _____ **RN State:** _____ **License Number:** _____

Address:		
City:	State:	Zip:
Program Title:		
Program Date(s)/Date Completed:		
Program Location (Facility, City, State):		
Awarding Institution: NAPNAP 40 Exchange Place, Suite 1902 New York, NY 10005	Provider Information:	Chapter/Agency/Program #:

This speaker is awarded 0.0 NAPNAP CE contact hours of which 0.0 contain pharmacology content, (0.0 are related to psychopharmacology) 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.