



**Verification of Approved Continuing Education Units  
for the  
School Nutrition Association**

<p>Title of Activity:</p> <p style="text-align: center;"><b>Pre-Review Workshop –Bookkeeper Session (Recordkeeping Requirements)</b></p>	<p>Participant Name:</p> <hr/> <p style="text-align: center;">Last <span style="margin-left: 150px;">First</span></p>
<p>Educational Provider:</p> <p style="text-align: center;"><b>Nebraska Department of Education-Nutrition Services</b></p>	<p>SNA Membership ID #:</p>
<p>Location (City and State):</p>	<p>CEU's Earned:     <b>2.5 Hours</b></p>
<p>Date(s):     <b>September 22, 2016</b></p>	<p>If Course also approved for specialized training, certification key area: <b>General</b></p>
<p>Signature of Educational Provider:</p> <p style="font-family: cursive; color: blue; font-size: 1.2em;"><i>Sharon L. Davis</i></p>	

Please keep this certificate for proof of continuing education.