



To: APPA Credentialing

RE: Proof of Attendance, Non-APPA Professional Competency Program

This letter will serve as proof of attendance for _____
First Name Last Name

having attended the following course(s):

	Title of Course/Conference	Date of Course/Conference	# of Hours Earned
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

for the purpose of CEFP Recertification with APPA: Leadership in Educational Facilities.

Sincerely,

Signature (Trainer/Director) Title

Print Name Email Address Today's Date