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School Health Associates

Certificate of Completion

presented to

for successful completion of

***“Providing Meaningful Information
to Your District’s School Board”***

Attended on the ___th day of ___ 2016

Awarded 1.5 Contact Hours

This continuing nursing education activity was approved by the Wisconsin Nurses Association, an accredited approver by the American Nurses Credentialing Center’s Commission on Accreditation.

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