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| 2022 AIA/CES Conference Session Participation Form (C-1)* Sessions listed on this form have been registered with the AIA/CES Records. Attendance will be recorded on your behalf by the CES Registered Provider. You may request a copy of this form for your files.
* You must include your AIA membership number to get credit. Check **Yes** for those activities you have completed.
* Member numbers that are missing or not legible will not be awarded credit.
* Partial credit/concurrent sessions marked “attended” are not awarded. Attendance issubject to verification.
* **DO NOT SEND THIS FORM DIRECTLY TO CES RECORDS — RETURN TO CONFERENCE STAFF!**
* Conference Provider will verify your attendance before forwarding this form to CES Records to record credit.
 |  |

**Participant Name:**

AIA Member #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Request Certificate: Yes\_\_\_\_\_ No\_\_\_\_\_

**Provider Name: Association for Learning Environments**

**Conference Number: 2022 June Symposium**

**Provider Number: F118 Program Dates: June 21-22, 2022 Program Location: Washington, DC**

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| --- | --- | --- | --- | --- | --- |
| **Attended** | Session # | Program Title | Credits | **LU** | **LU/****HSW** |
|  |
| June 21, 2022 – Presentation 1 – 1:30 PM |
| Yes [ ]  No [ ]  | 2022JUNSYMP01 | Enhancing Student Success Through Integrated Student Support | 2 | Yes ☒ |  |
|  |
| June 21, 2022 – Presentation and School Tour – 4:00 PM |
| Yes [ ]  No [ ]  | 2022JUNSYMP02 | Healthy Buildings to Facilitate Student Performance and Net Zero, WELL Certified School – John Lewis Elementary School | 1.5 |  | Yes ☒ |
|  |
| June 22, 2022 – Presentation 2 – 8:30 AM |
| Yes [ ]  No [ ]  | VASE2206/LS2154 | Conversations on Schools that Heal | 2 |  | Yes ☒ |
|  |
| June 22, 2022 – Presentation 3 – 10:30 AM |
| Yes [ ]  No [ ]  | 2022NTX23MAR | Panel Discussions | 1 | Yes ☒ |  |
|  |
| June 22, 2022 – Presentation 4 – 11:45 AM |
| Yes [ ]  No [ ]  | 2022JUNSYMP03 | School Facility Leadership During Tumultuous Times | 1 |  | Yes ☒ |
|  |
|  |  | Total Hours Attended: |  |  |

I hereby certify that the above information is true and accurate to the best of my knowledge and that I have complied with the AIA Continuing Education Guidelines for the reported activities.

**ATTENDEE SIGNATURE** ***(Credit will not be awarded without signature.)*** **DATE**

**Participants: Complete and return this form to:** The registration desk, or send to:

Attn. Edi Francesconi – A4LE – 11445 E Via Linda, Suite 2-440 – Scottsdale, AZ 85259 – E-mail: edi@a4le.org