

CNA CERTIFICATION PROGRAM

CONTINUOUS LEARNING FOR CERTIFICATION RENEWAL: ACTIVITIES

Name:	Specialty/Area of Nursing Practice:	Certification #:
	ther forms and tools used to record learning. Please submit in documenting the activities annually will help you achieve the	
We recommend that you keep an ongoing log of CL activities	es during the course of your five-year certification term.	

Date	Learning Opportunities	Sponsor/Provider/Institution	Number of CL Hours	Office Use Y/N

^{*}Eligibility criteria include completion of at least 100 hours of continuous learning (CL) activities related to your nursing specialty/area of nursing practice.

^{*}You can claim and project your CL activities up to the end of your five-year certification term

Date	Learning Opportunities	Sponsor/Provider/Institution	Number of CL Hours	Office Use Y/N

You can claim and project your CL activities up to the end of your five-year certification term.

Submit your list with your renewal application form by uploading it to the online application.

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