

## CNM Certification Continuing Education Tracking Form

Course Name	Speaker's Name	Length of course	Core competency	Date Completed	CE POINT

Submit copies of / Proof attendance / Information pamphlet / proof of completion / receipts / with the CE tracking form.  
 Keep a copy of all your education for your personal records. **CCPC performs periodic random audits.**

Name:	CSNM Membership Number:
Signature:	Date:

**Core Competencies:**

- |                                  |                                     |                                   |
|----------------------------------|-------------------------------------|-----------------------------------|
| 1.0 Professionalism              | 4.0 Clinical Nutrition              | 7.0 Financial/Business Management |
| 2.0 Quality Management           | 5.0 Food Service Systems Management | 8.0 Marketing and Promotion       |
| 3.0 Nutrition and Healthy Living | 6.0 Human Resources Management      |                                   |

Core Competencies explanations can be found on CSNM website. Please refer to these in order to maintain accuracy of point tabulation.