

CERTIFICATE OF SUCCESSFUL COMPLETION

June 2-3, 2022 **Texas Hospital Association Leadership Fellows Program: Module II**

| | | | CE Credit Requested: | | Yes | No |
|--|--|--|----------------------|-----|----------|-----|
| Name | | | | | , | |
| | | | ACHE Category II: | | | |
| Institution / Hospital | | | CPE | | | |
| | | | Proof of Attendance | | | |
| Address | | | | | | 1 |
| City/State/Zip | | | | | | |
| | ontinuing education hou ONO OTHER CERTIFICA | | | | and tota | ıl. |
| THURSDAY, June 2, 2022 | | | ACHE | CPE | F | POA |
| Engaging Elected Officials (12:15-1:45 p.m.) Joe Gagen | | | 1.5 | | | 1.5 |
| FRIDAY, June 3, 2022 | | | | | | |
| Pitching Your Ideas (9:30-11 a.m.) Elizabeth Goins, Ph.D. | | | 1.5 | | | 1.5 |
| TOTALS | | | 3 | | | 3 |
| | Sponsor: Texas Ho 1108 Lavaca Street, Ste 7 | 700, Austin, 1 | Texas 78701 | | | |
| ACHE Qualified Education Credit (non-ACHE) Participants in this program wishing to have the continuing education hours applied toward ACHE Qualified Education credit (non-ACHE) should indicate their attendance when making application to the American College of Healthcare Executives for advancement or recertification. Public Accountancy CPE The Texas Hospital Association has registered with the Texas State Board of Public Accountancy as a CPE sponsor. This registration does not constitute an endorsement by the board as to the quality of the program. This course(s) may be submitted to the Texas State Board of Public Accountancy for up 5.7 contact hour(s). | | POA's: Proof of Attendance – course length / instruction time clock hours. Many national, state and local licensing boards and professiona organizations will grant continuing education credit for attendance at this activity when you submit the course outline (save the brochure) and the Certificate of Attendance. If your discipline was not listed for pre-approved continuing education, is recommended you contact your own board or organization to find out specific requirements. | | | | |
| Lindsay/hompson | | e that the information provided is true and accurate. I have circled contact hours from erings for the sessions I attended in their entirety. | | | | |
| Senior Director of Education and Governance Programs Texas Hospital Association | Participant's Signature | | | | | |