



CERTIFICATE OF SUCCESSFUL COMPLETION

May 14-15, 2026

Texas Hospital Association Leadership Fellows Program:
Module III

PLEASE PRINT ALL INFORMATION USING A BALL POINT PEN

CE Credit Requested: Yes No

Name

Institution / Hospital

Address

City/State/Zip

ACHE Category II:

Proof of Attendance

Circle the appropriate continuing education hours or POA for each session attended and total.

*** NO OTHER CERTIFICATE WILL BE ISSUED ***

THURSDAY, May 14, 2026	ACHE	POA
Building Strong, Authentic, Trusted Business Relationships Part II (12:45-2:15 p.m.) Rodney Schlosser	1.5	1.5
2026 Interim Policy Priorities (2:30-3 p.m.) Will Holleman	0.5	0.5
Capstone Workgroups and Testimony Prep (3:15-4:45 p.m.)	1.5	1.5
FRIDAY, May 15, 2026		
Mock Testimony (9:15-11:15 a.m.)	2.0	2.0
Presentation Essentials (12:30-1:45 p.m.) Elizabeth Goins	1.25	1.25
TOTALS	6.25	6.25

Sponsor: Texas Hospital Association

1108 Lavaca Street, Ste 700, Austin, 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.

POA's: Proof of Attendance – course length / instruction time in clock hours.

Many national, state and local licensing boards and professional 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, it is recommended you contact your own board or organization to find out specific requirements.

Lindsay Thompson

Lindsay Thompson
Vice President of Education and
Governance Programs
Texas Hospital Association

I acknowledge that the information provided is true and accurate. I have circled contact hours from the above offerings for the sessions I attended in their entirety.

Participant's Signature

Please **RETAIN A COPY** of this certificate for your records.
Program registration is also required for verification of continuing education credit.