

# INDIVIDUAL ATTENDANCE RECORD



**LTC Connection**<sup>®</sup>  
Your Education Company

## 4 Hour Refresher Mandatory LTC Training

**Provider Name:** LTC Connection  
**Course Instructor:** Angela Hughes  
**Course Date:** March 5, 2026  
**Scheduled Time:** 10:00AM-3:00PM

**Course Address:** Scott Conference Center  
6450 Pine Street  
Omaha, NE 68106

State	Provider ID	Course ID	Credit	Authority
IA	20064	109818	4	Long Term Care Partnerships
NE	2093	6000162487	4	Long Term Care

## ATTENDEE AFFIRMATION OF ATTENDANCE (MUST BE COMPLETED IN FULL)

If any field in this section is left blank, credit will not be issued for attendance of this class. By signing below, you certify that you participated in and attended the entirety of the course as referenced. You further understand that any false claims made in this regard is a violation that could result in an administrative sanction and would include the loss of course credit.

CLASS ARRIVAL	CLASS DEPARTURE
<b>Time Entering Class:</b>	<b>Time Exiting Class:</b>
<b>Signature Upon Arrival:</b>	<b>Signature Upon Departure:</b>

SCHEDULED BREAKS		
<b>Lunch Start Time:</b>	<b>Lunch End Time:</b>	<b>Initial:</b>

## 1 ATTENDEE DETAILS (PRINT LEGIBLY)

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Company:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
Street City State Zip

**License State:** \_\_\_\_\_ **License Number:** \_\_\_\_\_ **NPN:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

## 2 REQUEST YOUR CREDITS (CHECK ALL THAT APPLY)

- Insurance License Continuing Education. Credit will be posted to your transcript and ClearCert will be notified.
- I don't want Insurance CE. Please only send me the *Long Term Care Certificate* for my carrier and notify ClearCert.
- Certified Financial Planning Continuing Education (CFP®). CFP Number: \_\_\_\_\_

## INSTRUCTOR CONFIRMATION OF ATTENDANCE

I attest that the above attendance record is true and correct. I have reviewed each form to make sure the attendees have signed and their times in and out are an accurate reflection of their class attendance. Students who arrived late or left were not given attendance forms and students who left early were told they would not receive credit.

Angela Hughes  
Instructor

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date