



ASHA
 American
 Speech-Language-Hearing
 Association

VERIFICATION OF ATTENDANCE

This form will be accepted as documentation of attendance for the ASHA certification maintenance professional development requirement. This form is provided for ASHA certificate holders to document professional development hours (PDHs), such as employer-sponsored in-service activities and other organizations' continuing and professional development activities.

This confirms that _____
 (print name of attendee)

Attended (title of activity):

Technically Speaking: A Closer Look at How to Increase Positive Outcomes with High-Tech AAC

Topics: **Augmentative and Alternative Communication, Autism Spectrum Disorders, Language and Learning in School-Age Individuals, Speech Sound Disorders in Children with Normal Hearing**

Completion date: 1/13/23

Number of PDHs*: 1.0

Certification Maintenance Verified By:

AbleNet, Inc.

Name of sponsoring organization or third party

James LaRocco
 Authorized individual's signature

2625 Patton Road Roseville, MN 55113

Mailing address of sponsoring organization or third party

(651) 294-2202 jlarocco@ablenetinc.com

Telephone number Email address

***ASHA PDH** = 60 minutes spent in a professional development activity as a learner or participant (not including break time).

0.1 ASHA CEU = 1 PDH

1.0 ASHA CEU = 10 PDHs

3.0 ASHA CEUs = 30 PDHs

1 quarter hour college coursework = 10 PDHs

1 semester hour academic coursework = 15 PDHs