



WVU Continuing Education Certificate in
Nonprofit Management Reporting Form
“WVNPA Sponsored Training: The Power of a Good Story”

Participant Name: _____

Phone: (_____) _____ Email: _____

Date: _____

<u>Name of Session</u>	<u>Hours</u>	<u>Signature of Presenter or Conference Official</u>
1) You Don't Need to Be Hemingway	1.0	_____
2) Give Your Story Wings	1.25	_____

I attended the session(s) listed above.

Signature of Participant

Date