



Certificate of Participation

By signing below, I hereby verify that I watched the Continuing Education webinar for *Recognizing Substance Abuse* in its entirety and answered the questions below on my own and without assistance.

Signature

Date

Answers for the questions at the conclusion of the webinar are as follows:

Please put your answer in corresponding blank.

1. _____ 2. _____ 3. _____ 4. _____ 5. _____