



2021 NASPA VIRTUAL CONFERENCE Virtual | March 21-24, 2021

CLOCK HOUR MONITORING FORM FOR NBCC

| Name: | | | | | | | | |
|---|----------------|--|-------------------|-------------|--|--|--|--|
| NCC #: | | | | | | | | |
| Email Address: | | | | | | | | |
| Phone Number: | | | | | | | | |
| Mailing Address: | | | | | | | | |
| City/State/Zip Code: | | | | | | | | |
| ☐ Conference Evaluation Completed | | | | | | | | |
| List each | n session in w | hich you participated in order of attendance | : | | | | | |
| Date | Time | Program Title | Speaker | Clock Hours | | | | |
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| Use Next Page for Additional Sessions T | | | otal Clock Hours: | | | | | |
| I certify that the information presented on this form is complete and accurate. | | | | | | | | |
| | | Signature | Da | te | | | | |

<u>Credit can only be granted for your participation in content sessions that will enhance your skills and knowledge as a counselor.</u> Please only request credit for <u>live sessions</u> that you attend in their entirety. Credit cannot be granted for recorded sessions, business/governance meetings, breaks, or social activities except for the actual time of a content speaker.

Before credit can be granted, an evaluation is required for each session you attend. A link to the online conference evaluation form will be sent to you after the conference.

**NOTE TO NCCs: This documentation should be registered in your NBCC supplied continuing education folder.

| Authorized by: Stephanie Gordon | | | | | | | |
|--|--|--|--|--|--|--|--|
| Title: Vice President for Professional Development, NASPA | | | | | | | |
| NBCC ACEP Number: 5120 | | | | | | | |
| Contact for verification of hours: Teri Gillmor • tgillmor@naspa.org • 202.265.7500, ext. 1182 | | | | | | | |
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| Date | Time | Program Title | Speaker | Clock Hours |
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