



**Division of Continuing Education
& Conference Services**

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**27th Annual Idaho Conference on Health Care – October 31, 2014
Thomas Geriatric Health Symposium Registration Form**

To help us plan better, we request that all participants pre-register by October 27 by sending in their completed registration form to ISU Continuing Education, Stop 8062, Pocatello, ID 83209-8062. The form may also be faxed (208) 282-5894 or emailed (extendedlearning@isu.edu).

Please complete ALL fields and type or print clearly.

☐ Mr. ☐ Ms. ☐ Dr.

Last Name _____ First Name _____

Affiliation/Department _____

Mailing Address _____

City/State/Zip _____

Daytime Phone _____ Email Address* _____

* **Required:** Registration confirmation and conference updates will be sent electronically to reduce mailing costs.

If affiliated with ISU, please check one: ☐ Undergraduate Student ☐ Graduate Student ☐ Faculty ☐ Staff

Please choose only one event to attend as they are both all day.

Registration Fees

The symposium is free of charge but **pre-registration by October 27** is required to attend.

Location

I wish to attend at ☐ ISU-Pocatello (live) ☐ ISU-Meridian Health Science Center (by distance learning)

Continuing Nursing Education Credit (CNE)

☐ I need ANCC/ACPE CE credit and agree to read the disclosure form available on the website and comply with all requirements.

ADA Accommodations/Special needs: (Requests must be received by October 13, 2014)

**IDAHO STATE UNIVERSITY SCHOOL OF NURSING
OFFICE OF PROFESSIONAL DEVELOPMENT
WRITTEN DISCLOSURE FORM FOR ALL REQUIRED DISCLOSURES
(when there is no conflict or there is conflict)**

Title of the CNE Activity: 7th annual Thomas Geriatric Health Symposium
Name of Entity Providing the CNE: Idaho State University School of Nursing
Date: October 31, 2014

Successful Completion of this CNE Activity

In order to receive full contact-hour credit for this CNE activity, you must:

- Be registered for this activity,
- Sign the Verification of Attendance Form at the registration desk,
- Be present no later than five (5) minutes after starting time,
- Remain until the scheduled ending time, and
- Complete and submit the evaluation form(s) before you leave at the conclusion.

Requirements may also include participation in individual or group activities, such as discussion, exercises, practice questions, pre/post-testing, etc.

Conflict of Interest (or lack thereof) for Planners & Presenters (list):

A conflict of interest exists if any individual/entity that is in a position to influence the content, design, or implementation of the CNE activity is ALSO in a position to benefit financially from the success of a CNE activity.

The planners and presenters of this CNE activity have disclosed no conflict of interest including no relevant financial relationships with any commercial companies pertaining to this CNE activity.

Commercial/Sponsor Support (List)

There is no commercial company or sponsor support for this CNE activity.

Non-Endorsement of Products

The (insert name of the responsible provider of this CNE activity) approval status refers only to continuing nursing education activities and does not imply that there is a real or implied endorsement of any product, service, or company referred to in this activity nor of any company subsidizing costs related to the activity.

Off-Label Product Use

This CNE activity does not include any unannounced information about off-label use of a product for a purpose other than that for which it was approved by the Food and Drug Administration (FDA).

Idaho State University School of Nursing (ISU-SON) is an approved provider of continuing nursing education by the Washington State Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.