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| **INSTRUCTIONS**:   * Participants are responsible for submitting this form to [rcr@une.edu](mailto:rcr@une.edu) to receive individual credit for attendance at a UNE RCR lecture series (live or on-demand video) or other external RCR educational event. Supplemental documentation is required to verify attendance at or completion of an external RCR event. * Contact the Office of Training in Research at [rcr@une.edu](mailto:rcr@une.edu) for any questions you may have with regard to this form. |

| 1. **PARTICIPANT & RCR EVENT INFORMATION** | | | | | | |
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| **Participant’s Name**:  Enter text | | | **You are**:  Faculty  Staff  Student  Resident | | **UNE Center or College**: | Enter text |
| **E-Mail**: | | Enter text | **UNE Dept. or Program of Study**: | Enter text |
| **Phone #**: | | Enter text |
|  | | | | | | |
| **RCR Event** *(select ONE)*:  UNE RCR Lecture Series  External RCR Educational Event**1** | | | | **Date(s) of RCR Event Attendance** (MM/DD/YYYY):  Enter text | | |
| **Title of RCR Presentation or Training**:  Enter text | | | | **Name of RCR Presenter(s) or Trainer(s)**:  Enter text | | |
| **1** | Complete Section B below and attach supplemental documentation to verify attendance (e.g., completion certificate, e-mail confirmation of attendance, copies of transcripts, or other materials to prove attendance or completion of the RCR event). | | | | | |

| 1. **EXTERNAL RCR EVENT SUMMARY** *(This section is NOT required for UNE RCR Lecture Series attendance)* |
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| **Summarize the content of the external RCR event and any themes that arose throughout the presentation or training.**  Enter text |

| 1. **PARTICIPANT ATTESTATION** *(Typed signatures are NOT accepted!)* |
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| I acknowledge attendance at the RCR event, and confirm the information provided in this form is true and accurate.   |  |  |  | | --- | --- | --- | |  |  |  | | Participant Signature |  | Date | |