

**COURSE ATTENDANCE VERIFICATION**

**I hereby affirm that I have reviewed INAAP's Fluoride Varnish Training Video in its entirety, as available at  
[www.inaap.org/fluoride-varnish](http://www.inaap.org/fluoride-varnish)**

Participant's Name: \_\_\_\_\_

State and License #: \_\_\_\_\_

Date: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

**Keep this form for your records.**