

Statement of Credit

This certificate is presented to

Participant's Name

for attending the

Title of the Program

BOC Approved Provider Name

Completion Date



*Company XYZ (BOC AP#: PXXXX) is approved by the Board of Certification, Inc. to provide continuing education to Athletic Trainers.
This program is eligible for a maximum of # Category A hours/CEUs. ATs should claim only those hours actually spent in the educational program.*