



# Certificate of Participation

**Session:** Workforce Development

Name: \_\_\_\_\_ Credential Holder NAA ID: \_\_\_\_\_

## Total CEC's Received

**One (1) CAPS, CAM, CAS, NALP, and CAMT Continuing Education Credits**



**Joshua Dick**  
Executive Director  
Apartment Association of North Carolina

June 28, 2023

**Date**

*This certificate certifies you attended this one hour session. Send a copy of this certificate to the National Apartment Association to receive your credit.*