

INSTITUTE FOR BANK DIRECTOR EDUCATION

Attention: Education Director
Suite 700
1250 24th Street, NW
Washington, DC 20037
(202) 463-4888
(202) 349-8080

PROOF OF ATTENDANCE FORM (FOR IBDE PURPOSES ONLY)

To ensure proper credit, please PRINT or TYPE, and mail this form within 30 days of attendance at the course.

MEMBER INFORMATION:

_____ Check if new address

Name: _____

Bank Affiliation: _____

Address: _____

Daytime Phone: _____

AABD Premium Member

COURSE INFORMATION:

Course/Program Title: Core Course Presentation

Date and Location of Course: May 19, 2010

Credit Hours: # 6 CORE # _____ SUPPLEMENTAL
(towards AABD education certification only)

Sponsor of Course: AABD (David Baris and Dave Martin)

CERTIFICATION OF INSTRUCTOR OR COURSE PROVIDER:

Mr./Ms. _____ attended the course listed above on

_____.

Date

Course Instructor/Course Provider