

STUDY CLUB ANNUAL REPORT

December 2023

RETURN THIS FORM AND AN UPDATED MEMBERSHIP LIST TO CDHNS BY DECEMBER 31

|  |  |
| --- | --- |
| Name of Study Club:  | Click here to choose your Study Club |
| Chair of Study Club: |  |
| Phone/Email of Chair:  |  |

Executive Committee



Were your meetings virtual this year? [ ] Yes [ ]  No

|  |
| --- |
| If yes, please provide information on the protocols and policies that were implemented to ensure that the Study Club Verification requirements under 7.2.2 (4) were met. |



**Presentation 1:**

Date: Click or tap to enter a date.

Length of Presentation: 

Topic and Description:



Course Objectives:



Speaker Name and Qualifications:



**Presentation 2:**

Date: 2023-11-10

Length of Presentation: 

Topic and Description:



Course Objectives:



Speaker Name and Qualifications:



**If you did not have any presentations/meetings, what were the reasons?**



**What goals or plans does your study club have for the upcoming year?**



**OTHER PRESENTATIONS FOR THE YEAR YOU ARE REPORTING ON, IF APPLICABLE**

**Presentation 3 (if applicable):**

Date: Click or tap to enter a date.

Length of Presentation: 

Topic and Description:



Course Objectives:



Speaker Name and Qualifications:



**Presentation 4 (if applicable):**

Date: Click or tap to enter a date.

Length of Presentation: 

Topic and Description:



Course Objectives:



Speaker Name and Qualifications:

