

# CERTIFICATE OF PARTICIPATION

This is to certify that I, \_\_\_\_\_,  
(print name)  
participated in CVI Webinar 1: Visual and Behavioral Characteristics  
Associated with CVI with Dr. Christine Roman-Lantzy on  
\_\_\_\_\_.  
(date)



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Signed: \_\_\_\_\_  
(your signature)

Webinar: 1 hour