



Protocol Training

Attestation

By my dated signature below, I verify that I have completed the Sleep SMART Protocol Training via one of the following mechanisms (select one):

- I received training at the Sleep SMART Investigators Meeting and passed the protocol quiz with at least a 80%
- I have reviewed the Sleep SMART Protocol and passed the protocol quiz with at least a 80%

PRINT NAME: _____

SIGNATURE: _____

DATE: _____

After completion, upload this form to WebDCU