

CE Verification of Attendance

PLEASE NOTE: This is not a CE credit claim form, please access your MY TRANSCRIPT account on the DIA website to claim CE credit.

Instructions for Completion of Form:

- Please write your name below (please print clearly)
- For each session attended, place a check mark in the appropriate box
- Sign and date the form below and return this to CE@DIAglobal.org by **November 22, 2022**
- Access your DIA account and select My Transcript to claim your ACPE credit, available on **Tuesday, November 29, 2022.**

Print Name: _____ Email Address: _____

Time	Title	Attended
Monday, November 14		
10:00-11:15AM	Session 1 : How can we balance the fast-paced tech world in a slow regulated environment?	
11:30AM-12:15PM	Session 2: Mainstreaming Artificial Intelligence (AI) and Machine Learning (ML) in Pharmaceutical Development: How Can We Next-Level AI and ML?	
1:00-2:00PM	Session 3: Keynote - Advancing Clinical Evidence Generation of the Future	
2:30-3:45PM	Session 4: What Can We Learn from Regulators About Data Science?	
4:00-5:15PM	Session 5: Exploring Data Science Careers Within Pharmaceutical and Healthcare Industries: Do We Have the Right Professionals in the Room?	
Tuesday, November 15		
10:00-10:15AM	Introduction to DIA Data Science Community and Working Group	No CE
10:15AM-12:15PM	Session 6A: Are We Doing Enough to Enable Effective Cross-industry Collaboration in Data Science?	
10:15AM-12:15PM	Session 6B: The Journey to Identifying Useful Biomarkers: Are We There Yet?	
12:30-2:30PM	Session 7A: Unlocking Innovations in Data Science: Can We Reimagine Our Design Strategy and Effectively Identify the Right Data Sources?	
12:30-2:30PM	Session 7B: Leveraging the Patient Voice, Site/Investigator, and Digital Health Technologies: How Can We Transform the Healthcare Landscape More Effectively?	
2:45-3:30PM	Session 8: Closing Plenary - Data and Technology Strategy	
3:30-3:30PM	Closing Remarks	

"By signing below, I hereby attest that the sessions listed above accurately reflects my participation in this educational activity. I understand continuing education credit is only available for the total number of CEUs advertised and that I cannot receive partial credit for IACET. Furthermore, I understand that complete attendance is necessary in order to be eligible to receive IACET credit. I do hereby attest that this information is true, accurate and complete to the best of my knowledge and I understand that any falsification, or concealment of information may subject me to the rescindment of CE credit."

By checking this box I authorize my Signature.

Signature: _____

Date: _____