



North Dakota DENTAL ASSOCIATION

Continuing Education Certificate

The North Dakota Dental Association hereby certifies that on **September 16, 2021**, **Alessandro Villa, DDS, MPH, PhD** presented a continuing education course, "**Dental Providers and HPV Associated Cancers**" in **Fargo, North Dakota**. Attendees of the seminar had the opportunity to obtain **1 hour** in continuing education credits.

William Sherwin, NDDA Executive Director

Certification of Attendance

I, _____, hereby certify that I attended _____ hours of the aforementioned continuing education course.