

FAX Cover Sheet
Diabetes Tele-education Program

PLEASE FAX IMMEDIATELY AFTER CLASS TO: (434) 243-9143

Attention: VA Center for Diabetes Prevention & Education

Check the Class Name:

_____ "The Basics of Diabetes & Medications"

_____ "Nutrition Basics"

_____ "Glucose Control, Activity, & Stress"

_____ "Healthy Eating Lifestyle Changes"

Check the Month:

_____ April

_____ June

_____ October

Facilitator's Name: _____

Site Name: _____

Please complete and include:

- ☐ Registration form
- ☐ Attendance sheet (please check to see if readable)
- ☐ Program evaluation sheets

Issues, questions, requests: