

REGISTRATION AND ATTENDANCE TRACKING FORM

The Registration and Attendance Tracking Form was developed to help organizations track enrollment and participation in the National Diabetes Prevention (DPP) lifestyle change program. **This form should be completed by a lifestyle change coach and/or other program staff at your organization.** Overall instructions are provided below. **One form should be completed for each introductory session that your organization implements.** If your organization implements two introductory sessions, for example, please complete two Registration and Attendance Tracking Forms.

INSTRUCTIONS

How to Use:

Before you begin, please make sure you have included your initials, your organization's name, its DPRP code, the site/class location, and the date of the introductory session for which you are submitting data in the site data tab. The questions on the Registration & Attendance tab are specific to introductory and post-introductory session activities. Please answer the questions thinking about the introductory session implemented as part of the DPP lifestyle change program. Add more rows if needed.

To be Completed by:

The Registration and Attendance Tracking Form should be completed by a lifestyle change coach or a program staff member who has access to registration and attendance information at your organization.

When to Use:

Please update this tracking form regularly as your organization implements an introductory session, registration, and program delivery. The form covers activities through the first session of the lifestyle change program associated with the introductory session.

When to Submit:

Please submit this form to RTI International within 21 days of the date of the introductory session and do not collect additional information after that time.

Upload the document to [\[insert link here\]](#)

REGISTRATION AND ATTENDANCE TRACKING FORM

Whom to Contact with Questions:

Please contact RTI International [[Point of Contact Email](#)]

CDC estimates the average public reporting burden for this collection of information as 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-xxx).

REGISTRATION AND ATTENDANCE TRACKING FORM

Your Initials	<i>Enter initials here</i>
Organization Name	<i>Enter organization name here</i>
Organization DPRP Code	<i>Enter DPRP code here</i>
Site/Class Location	<i>Enter location here</i>
Date of the Introductory Session for Which You Are Submitting Data:	<i>Enter date here</i>

Please respond to the questions in the next tab.



ab **and** who are eligible to participate in
ered for the lifestyle change program by
documentation of intent to attend the
perwork, providing health insurance
andardized process and will have a

ended session 1 of your lifestyle change
want to edit. Then, click the arrow to

Attended Session 1

