

# AIA/CES Conference Session Participation Form (C)



- Sessions listed on this form have been registered with the AIA/CES Records. Attendance will be recorded on your behalf by the CES Registered Provider. You may request a copy of this form for your files.
- You must include your AIA membership number to get credit. Check **Yes** for those activities you have completed.
- Member numbers that are missing or not legible will not be awarded credit.
- Partial credit/concurrent sessions marked "attended" are not awarded. Attendance is subject to verification.
- **DO NOT SEND THIS FORM DIRECTLY TO CES RECORDS — RETURN TO CONFERENCE STAFF!**
- Conference Provider will verify your attendance before forwarding this form to CES Records to record credit.

**Participant Name:** \_\_\_\_\_

**Provider Name:** **Construction Owners Association of America**

**Conference Number:** 10A

**Provider Number:** G245 **Program Dates:** May 5-7, 2010 **Program Location:** Pittsburgh, PA

AIA Member #: _____
Request Certificate: Yes _____ No _____

Attended	Session #	Program Title	LU Hours	HSW / SD	
				Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	10A001	The Greening of PNC	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	10A002	Consol Energy Center Project	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	10A003	Consol Energy Center Tour	1.5	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	10A011	Preparing for Change ... Are WE Ready?	1	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	10A12A	There's No "I" in Team: Creating Balanced Goals to Maximize Team Success	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	10A12B	Best Value Procurement – Strategies and Practices for Successful Selections	1	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	10A13A	Looking in the Mirror and Being Surprised: Understanding How You Do Business	1	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	10A13B	Qualifications-Based Selection of Contractors	1	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	10A014	Scoping & Award of GMP Subcontracts – How to ensure Fairness, Thoroughness, and Transparency	1	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	10A15A	Investing in Excellence – Creating World Class Project Teams	1	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	10A15B	Did You Say "Design/Build?"	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	10A016	Electronic Etiquette: Ground Rules for the Wireless & Paperless Age	1	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	10A021	Understanding How A Lean Culture Supports IPD	1	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	10A22A	3PQ: A Structured Approach to Managing and Executing Project Delivery	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Yes <input type="checkbox"/> No <input type="checkbox"/>	10A22B	Innovation in Action: A Pre-Fabrication Case Study	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	10A23A	Ramping Up for BIM and Integrated Project Delivery	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	10A23B	Surviving Turbulent Times with Project Risk Management Strategies	1	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	10A024	BIM Standards and Guidelines: An Indiana University Case Study	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Yes <input type="checkbox"/> No <input type="checkbox"/>	10A025	Owner Forum Live!	1.25	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<b>Total Hours Attended:</b>					

I hereby certify that the above information is true and accurate to the best of my knowledge and that I have complied with the AIA Continuing Education Guidelines for the reported activities.

ATTENDEE SIGNATURE (*Credit will not be awarded without signature.*)

DATE

Participants: Complete and return this form to: Lisa DeGolyer

FAX – 866-266-5004 (no cover page needed)

EMAIL – ldegolyer@coaa.org

MAIL – COAA

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