

## PARTICIPATION EVALUATION FORM

NAET Advanced 2 C Balancing Your Qi Using Pearls of Wisdom From Oriental Medicine

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**Provider's Name and Number**

Dr. Devi S. Nambudripad, AC 089

**Course Beginning date:** 3/23/2022 11:13:30 AM

**Course Ending date:** 7/2/2022 10:40:15 AM

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**Participant's name and License #:**

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L.Ac., ISRAEL

**Date of Evaluation:** 7/2/2022

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**Did this course meet its STANDARD OBJECTIVES?**

yes it is

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**Did the Instructor Demonstrate adequate knowledge about the course subject?**

yes

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**Did the instructor utilize appropriate teaching methods**

Yes

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**Do you feel that you will be able to apply what you have learned from this course to your practice?**

Most of the material studied except for the part of the homeopathic test tubes

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**Would you recommend this course to other licensed medical professionals?**

yes

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**Do we have your permission to share your views with other practitioners?**

yes

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