

PARTICIPATION EVALUATION FORM

NAET Basic and Advanced-1 combined Online Course

Provider's Name and Number

Dr. Devi S. Nambudripad, AC 089

Course Beginning date: 6/20/2023 2:48:15 PM

Course Ending date: 9/8/2023 12:34:31 PM

Participant's name and License #:

Peter White

AZ

Date of Evaluation: 9/8/2023

Did this course meet its STANDARD OBJECTIVES?

Yes and more!!

Did the Instructor Demonstrate adequate knowledge about the course subject?

Extreme knowledge!

Did the instructor utilize appropriate teaching methods

online...

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

100% its a lot of information and it is quite thorough! Looking forward to diving into the materials more!

Would you recommend this course to other licensed medical professionals?

Yes

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

Yes
