



Mentor Verification Form

Date:
Candidate Name:
Email:
Mentor's name:
Email:

Provide a brief description of the quality of your mentee's work on 5 EEGs or QEEGs.

Include your recommendation for certification level:

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_____ I attest this QEEG candidate provided sufficient learning to be eligible for technologist or diplomate certification*

***Diplomates must provide 5 EEG acquisition records and QEEG interpretation reports of satisfactory quality. Technologists must provide 5 EEG acquisition records of satisfactory quality.**

Return this completed form to: qeeccb@gmail.com

QEEG Certification Board | 5613 Duraleigh Rd. #101 | Raleigh, NC 27612

Liza Chartier, Administrative Assistant, qeeccb@gmail.com