IQCB Mentoring for QEEG Certification Time/Activities Log Form

IQCB Candidate Name: _____

Certification Mentor: _____ QEEG-D/DL #: _____

The log below lists the specific dates, times and descriptions of mentoring activities being presented for certification. *Note: More than one mentor may be used.*

Date	5 QEEG Reports & 10 Contact Hrs	Description of Certification Mentoring Activities	Hours Spent
		TOTAL HOURS	

I attest that the mentoring hours listed above are accurate.

QEEG-D/DL Mentor Signature: _____ Date: _____

IQCB Candidate Signature: _____ Date: _____