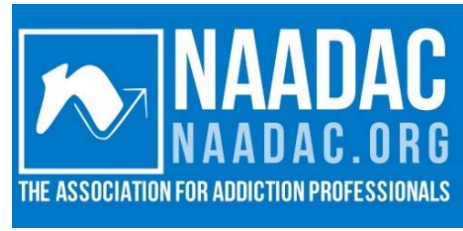


# Form C: References

Applying providers must submit three written references or two sets of compiled evaluations, including participant comments, from two different courses previously offered. Written references may either utilize this form or be in letter form containing all of the information requested in this form.



TYPE OF REFERENCES SUBMITTED	
	Three (3) letters of reference
	Compiled evaluations, including individual participants' comments, from two (2) different courses previously offered

REFERENCES <i>(if applicable)</i>	
1. Reference's Name:	
2. Reference's Name:	
3. Reference's Name:	

COURSE EVALUATIONS <i>(if applicable)</i>	
1. Course Title:	
Instructor Name:	
Course Dates:	
2. Course Title:	
Instructor Name:	
Course Dates:	

# Reference

The provider named is applying to NAADAC to become a NAADAC Approved Education Provider.

Your assessment of the applicant’s characteristics will enable the board to evaluate whether or not the applicant meets its standards. (Question #1 applies to the individual completing this form.)



<b>Applying Provider:</b>							
<b>1. Reference’s Name:</b>							
<b>Profession:</b>							
<b>Degree(s):</b>							
<b>Title:</b>							
<b>Business Address:</b>							
<b>City/State/Zip:</b>							
<b>Email:</b>			<b>Phone:</b>		<b>Cell:</b>		
<b>2. Please rate the applicant compared to other individuals who have made educational presentations to the members of your organization. Please rate the applicant in each area listed below, using the following scale:</b>							
		<b>1-poor</b>	<b>2-below average</b>	<b>3-average</b>	<b>4-above average</b>	<b>5-excellent</b>	
a.	Applicant’s subject knowledge & expertise	1	2	3	4	5	
b.	Ability to present up-to-date information	1	2	3	4	5	
c.	Ability to present material in a clear, orderly manner	1	2	3	4	5	
d.	Ability to train material to a level appropriate to audience	1	2	3	4	5	
e.	Ability to respond to questions/needs of audience	1	2	3	4	5	
f.	Ability to maintain interest level of audience	1	2	3	4	5	
g.	Ethical conduct	1	2	3	4	5	
h.	Ability to handle business affairs in a profession manner	1	2	3	4	5	
<b>3. Would you contract with this individual/organization to present future programs to your organization/ staff members? If “no” please explain:</b>							
Yes				No, please explain below:			
<b>4. RECOMMENDATION: I recommend this applicant for approval as a NAADAC provider of continuing education activities:</b>							
Yes				No			

**5. Additional Comments (please include additional sheets if necessary):**

**The above information is based upon my best judgment. I am willing to answer additional questions concerning this evaluation if requested.**

Signature of Reference:

Date:

**After completing this reference form, please enclose it in a sealed envelope, sign the sealed flap and return it to the applicant.**