Applicant's Evaluation
(Form B)

Please complete and return this form to:

BEMA
7101 College Blvd., Suite 1505
Overland Park, KS 66210
Phone: 913.338.1300 FAX: 913.338.1327

Name of course, program, seminar or workshop:

Dates taken: _____

How would you evaluate the course, program, seminar or workshop?

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Signature _____ **Date Submitted** _____