## **Brain Injury Network of Northern Michigan Presentation**

Certified Brain Injury Specialist (CBIS) Evaluation Sheet

Date:	April 18 2024_				
Your Name:					
Presenter:	Dave March and	l Anthony Bouwh	ais	_	
Orthotic Opti	ions for Managing	Upper Motor Neu	ron Injuries		
1. The presentation met the objectives.					
1 = S	trongly Disagree	2 = Disagree	3 = Neutral	4 = Agree	5 = Strongly Agree
2. The presentation will increase my understanding and care for the client with a brain injury.					
1 = S	trongly Disagree	2 = Disagree	3 = Neutral	4 = Agree	5 = Strongly Agree
3. Comr	ments:				

Please return this form before leaving this evening, sign out and receive your CBIS certificate.