

# Final Exam

## Center for Aromatherapy Research and Education

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**READ INSTRUCTIONS CAREFULLY:** Successful completion of this exam satisfied Requirement #17 toward becoming a Certified CARE Instructor (CCI) and is worth 30 credit hours. There are 153 questions worth 10 points each for a total of 1,570 points. A score of at least 97% (1,523 points) is necessary to pass this test. Please type your answers between the questions. Handwritten answers are not acceptable.

When completed, print out a hard copy and send it to CARE with your Completed Application containing all of the signatures and your Application Fee. (Requirement 18) Where drawings or figures are asked for, do them on a sheet of paper and enclosed with the hard copy of your exam. Write your name at the top of every page and then sign and date your exam on the last page before sending it to CARE. Allow four to six weeks for it to be graded and your application to be processed.

This is a take-home, open-book test administered on the honor system. In searching for answers, you may consult, not only your class notes, required texts, and DVDs, but the internet and other people as well, including other CARE Instructors.

There is no time limit in completing the test, which normally takes 60-80 hours spread out over a period of weeks or months. However, there is a two-year limit in completing the first 18 requirements toward becoming a CCI, measured from the date of your first CARE Raindrop Class. You may start working on the exam a few questions at a time anytime after your first CARE Raindrop Class, but do not submit it to CARE until you have completed every other requirement (1-17) and are ready for Requirement 18 (Submission of your Application).

If you do not pass the exam the first time, the questions you answered incorrectly or incompletely will be noted and you will be given a second chance. Upon completion of the test with a score of 97% or above, you will receive a letter of congratulations and your CARE Intern (CI) Certificate, which is good for one year, or until you successfully complete your Internship Class (Requirement 19). It is then that you will receive your CCI pin and CCI Certificate.

- 1. Name two books that describe raindrop technique. Give titles and page numbers. Are these descriptions the same as the Raindrop on the CARE DVD and taught in CARE Classes?**
2. Who developed the raindrop methodology and coined the term “raindrop technique”?
3. Name the Native American who collaborated in developing raindrop technique. (See the 1st or 2nd editions of the Essential Oils Desk Reference for this or ask someone who has a copy.)
4. Why is it called “raindrop”? What is the purpose of dropping the oils as is done in raindrop?
5. Why is the term “raindrop therapy” no longer used?
6. In performing raindrop, why do we use the terms “facilitator,” “session,” “receiver” and “client” instead of “practitioner” or “therapist,” “treatment,” and “patient”.

7. List all of the oils and oil blends used in raindrop, as taught by CARE. Give the family and botanical names of each single oil and the individual constituents of the blends. (i.e., Family, genus, species and chemotype where appropriate).
8. Describe the properties that make each single or blend of oil in raindrop of therapeutic value. i.e., How is each raindrop oil thought to support various systems of the human body. (Some of this may be in your Raindrop Notes passed out in class.)
9. What is an essential oil chemotype? (Clue: Not all oils have chemotypes)
10. What chemotype of Thyme do we customarily use in raindrop? What chemotype of Basil do we customarily use in raindrop?
11. What is the difference between an essential oil and a fatty oil? Why is one called “aromatic” and the other not? Discuss what parts of the plant they come from, what purposes they serve in the plant, and to what extent each type of oil penetrates human skin and circulates in the body as a therapeutic substance.
12. Who coined the word “aromatherapy”? What was his nationality, and approximately when did he live?
13. What accidental experience led the 20th century originator of aromatherapy to dedicate his life in research and teaching others about the therapeutic qualities of essential oils?
- 14. Name the book with the Bible Oils Program and give page numbers.**
15. List all the oils used in the Biblical Oils Program (excluding those in the 7th Heaven Kit). Give the family and botanical names of each single oil and constituents of the blends.
16. Give one example of how each oil was used for medicinal, spiritual and/or emotional purposes in ancient times as well as in modern times.
17. Which oil or oils of the Bible Program are used in raindrop?
18. Which oil or oils of the Bible Program, although not used in raindrop, are in the same botanical family (the mint family) as many of those used in raindrop. List the raindrop oils in this family and give its botanical name(s).
19. Name ten oils used in biblical times but not mentioned in the Bible. Give both the common and botanical names of each.
20. Discuss the meaning of the Bible verses, Mark 6:7, 10-13 with respect to Jesus’ instructions on healing.
- 21. Besides your vitaflex class notes, name two books that describe vitaflex and identify the original one (i.e., The one that came first) as well as its author. Give page numbers for each.**
22. Why does CARE require the vitaflex class as pre-requisite to taking Raindrop?
23. Define or describe vitaflex.
24. Explain the electrical/physical basis of how and why vitaflex works, and define the word piezoelectric.

25. Based on the electrical nature of both oils and vitaflex, how does the use of vitaflex with essential oils increase the effectiveness of the oils? (Or conversely, how does the use of essential oils increase the effectiveness of vitaflex?)
26. List six different vitaflex applications, where and how applied on the body, and for what purpose. Mention any suggested oils that can be used in each case. Which vitaflex technique is your favorite.
27. List two vitaflex applications incorporated into the raindrop protocol.
28. List one or more vitaflex applications for colon clearing, which is usually optional with raindrop, and explain when you might include this as a part of raindrop for a particular client and why.
29. Name the twelve systems of the human body and briefly describe each.
30. Draw a picture of the spine. Indicate and name the six sets of nerves that originate from the brain and spine and describe what organs and body parts are served by each. (Answer this question on a separate sheet of paper.)
31. Draw a picture of the soles of the feet and show the various reflex points for the various areas and organs of the body.
- 32. Name three required texts that deal with emotional issues and indicate which of them include the use of essential oils. (Note: Healing Oils of the Bible also deals with this, but here we want the names of books that specializes on this topic. Some of the information for the next several questions can also be found in the Emotional Release Notes given to you in class.)**
33. From a physiological point of view, why do essential oils have emotional impacts when inhaled? That is, what is the difference between smell and the other four senses with respect to how they connect to the brain?
34. How many cells are there in the body and what is the potential memory capability of each cell (in the DNA) in terms of gigabytes?
35. How do emotions get stored in various body parts and what are some possible symptoms that can manifest when an emotion is stored (say in a joint, organ, muscle, etc.)?
36. Explain how placing a specific oil on a specific body location can release an emotional memory.
37. Why is it important for those doing raindrop technique to have some understanding of the emotional aspects of the oils?
38. Although it is not a required text, name the book mentioned in class (and available from CARE) that discusses the way receptor sites work and how hormones, peptides, neurotransmitters, steroids, enzymes, and other chemicals manufactured by the body serve as intercellular messengers.
39. The cells and tissues of the body communicate between each other in at least two ways. Describe two ways and what are the names of the two bodily systems involved?
- 40. Name a book that names various diseases and the emotions behind them and which also provides a personal script for releasing these emotions and healing their physiological manifestations.**

41. List six diseases or conditions and their possible emotional bases.
42. List six emotions that have personal meaning for you and their emotional opposites.
43. In the self-releasing script of Karol Truman's book, to whom or what is the script addressed? Write out the entire script.
- 44. Name a book that identifies emotional issues with each individual vertebra.**
45. List six vertebra of particular interest to you, their emotional-spiritual associations, and the affirmations that will bring healing.
46. What four thought patterns cause the most disease and what types of sicknesses do each of them correspond. (See Hay, p. 7)
- 47. Besides the Essential Oils Desk Reference, name three other required texts that describe and define the requirements for therapeutic grade oils?**
48. For what purpose or purposes are most of the world's supply of essential oils produced?
49. What constitutes a therapeutic grade of essential oil versus a food or fragrance grade? In your answer, explain what it takes for create a therapeutic grade of essential.
50. What is the meaning of the acronym, "AFNOR?" i.e., What do the letters, A, F, N, O, R stand for? (See Archives of Raindrop Messenger, Vol 3, No 3, April 2005 issue.) NOTE: The meaning of this acronym has been erroneously published in many sources, including the first printing of The Chemistry of Essential Oils Made Simple. In the second printing of this book (late 2006) the definition of AFNOR has been corrected.
51. If an oil is labeled as "AFNOR," does that mean it is therapeutic grade? If yes, explain why. If not, then what does meeting AFNOR standards imply about the quality of the oil? In other words, can an oil be legitimately labeled as AFNOR and be a fragrance or food grade oil? (i.e. not therapeutic) NOTE: See Archive or 2nd printing of the book mentioned above.
52. Explain what is an aromatherapy grade oil (as defined in England).
53. What are two meanings of the word "organic" when seen on essential oil labels? And which of these two meanings pertains to a therapeutic grade oil and which does not?
54. What is the commonly understood meaning of the word "natural" and the technical meaning accepted by the FDA?
55. Why does CARE officially endorse only Young Living essential oils?
56. What are some of the potential consequences of using non-therapeutic grade oils, and why are they not used in raindrop?
57. What oils are passed around at the beginning of a CARE Chemistry class and why?
- 58. What is the title of the CARE Certification Program booklet?**

59. What is the purpose and main objective of the CCI program?
60. What is CARE's relationship to Young Living Essential Oils, Inc.?
61. What is Requirement 11? To whom must you go to satisfy Requirement 11? What requirements must you have fulfilled before scheduling a session to fulfill Requirement 11? Can you use notes during this exam? If you don't pass the first time, what are your recourses?
62. Upon fulfilling Req. 11, you are eligible to apply to become a CRP and LSH. What is a CRP and an LSH? To whom does one send their application form and fee to become a CRP/LSH? While status as a CRP/LSH is available only through CARE, what two other organizations are involved in making this possible?
63. If one is both a CRP and an LSH, how does this work to make it legal for anyone to practice raindrop throughout the U.S. and Canada?
64. Requirement 12 must be satisfied by assisting at a three-day CARE Intensive Seminar. In doing so you become a CCA. What is a CCA? What is a Qualified CCA? What can a Qualified CCA do that a CCI Candidate cannot do?
65. What is a "Basic Set of CARE Classes"? What is the minimum number of "Basic Sets" to be taught required (a) of a CI to become a CCI? (b) of a CCI to become a Supervising CCI? And (c) of a CCI to maintain their Active status on a yearly basis?
66. What is a CARE Intern? Do CARE Internship classes count for CARE credit to the students who take such classes? Besides the CARE Intern serving as instructor in a CARE class, who else is required to be there as overseer? How does a CARE Intern become a CCI?
67. What is a Supervising CCI and how does a CCI become one? What are the additional privileges of a Supervising CCI, beyond those of a CCI?
68. What is a Chem-Authorized CCI, an ER-Authorized CCI and a Fully Authorized CCI? Do CCI's qualify to become any of these three or does one have to be a Supervising CCI to qualify?
69. Can a CCI organize and teach a full three/four-day CARE Intensive?
70. What are the requirements to remain on active status as CCI?
71. What is an Inactive CARE Instructor (ICI) and what are several ways a CCI can become "Inactive"? What must an ICI do to regain "Active CCI Status" (depending on the manner in which they became "Inactive")?
72. What is a BCRS and how does one become a BCRS? Where in the CCI Handbook is the info on BCRS?
73. Which of the CARE classes are "hands-on" and which are lecture/demonstration? Why does CARE restrict class size for hands-on classes? Define and discuss the required minimums and maximums of CARE Class size.
74. Paraphrase six of the privileges of a CCI you consider to be the most important to you and why.
75. Paraphrase eight of the responsibilities of a CCI you consider to be the most significant and why.

76. Paraphrase and explain five points of the CARE philosophy you consider the most significant. Where possible, indicate how these points relate to scripture.
77. Under what circumstances could a CCI's title and privileges be revoked and how could they be reinstated in such cases?
78. What is the procedure for obtaining certificates for students who take your CARE Classes?
79. Offers classes in Raindrop I and Raindrop II, each four hours. Does one get one or two certificates for completing both of these? CARE also offers Chemistry I and Chemistry II. Does one get one or two certificates for completing both of these? Does one get a certificate for completing only one of the two Chemistry classes? What is the total number of credit hours for completing both Chemistry I and Chemistry II?
80. Does everyone attending a CARE Bible Oils class receive a certificate? If not, under what circumstances do people earn a certificate from a CARE Bible Oils class?
- 81. Name two book sources of information on essential oil chemistry among your required texts.**
82. List five of the main classes (besides terpenes) of chemical constituents of essential oils discussed in class (examples: alcohols, ketones, oxides, etc.) and give one property generally attributable to each (such as antibacterial, stimulating, analgesic, etc.)
83. Typically, approximately how many individual compounds make up an essential oil? Two or Three? Dozens? Hundreds?
84. Given a list of the main constituents in an essential oil, is it possible to predict the effects or healing properties of that oil? Why or why not?
85. If an ingredient of an oil is toxic when administered alone, does that mean that a therapeutic grade oil containing this ingredient is toxic? Give at least two examples of toxic or noxious compounds found in essential oils. (Name the compound and the oil in which it is contained.)
86. Is every batch of an essential oil the same from crop to crop and from year to year and location to location? Mention some of the factors that cause each batch to differ from all other batches of the same species grown at different times and locations.
87. What significance does the natural variability of essential oils have to their abilities to fight bacteria on a long term basis? And compare this with pharmaceutically produced antibiotics.
88. Define the following: electron, proton, neutron, atom, element, molecule, compound, and mixture.
89. What is valence? Give the valence of Carbon, Hydrogen, Oxygen, Sulfur, and Nitrogen.
90. What is the Periodic Table and why is it called Periodic?
91. Define free radical, why they are undesirable in the human body, and how oils affect them.
92. Define what an isomer is. Give three examples of isomers found essential oils and name specific oils in which they are found.

93. What is a chiral isomer? Give two examples of chiral molecules found in essential oils and name specific oils in which they are found.
94. Define isoprene unit, terpene unit and how they relate to one another. Give their chemical formulas. (i.e., give number of carbon and hydrogen atoms in each unit.) Are either or both found in the CARE Logo? Draw a picture of an isoprene unit.
95. What do terpenes have to do with essential oils?
96. Name the structural formula that is part of the design in the CARE logo, and explain what it has to do with essential oils.
97. What is the formula for a hydrocarbon monoterpene, sesquiterpene, and diterpene (i.e., give the number of carbon and hydrogen atoms for each case). List these three classes of terpene compounds in the order of their molecular weight from lightest to heaviest.
98. Which is the most aromatic? A large, heavy molecule or a tiny, light one?
99. Which molecules have therapeutic value in aromatherapy? The large, heavy ones, or the small, light ones? Explain your answer.
100. In terms of receptor sites and cellular memory (DNA), name three of the most important types of compounds found in essential oils (beginning with the letters P, S, and M) and describe. Explain how the actions of these three classes of compounds can bring about rapid and permanent healing.
101. What can happen when essential oils are exposed to light? How is this problem prevented in the packaging and storage of oils?
102. What can happen to some of the constituents of an essential oil when they are mixed with water, such as in a water-based diffuser?
103. What can happen to an oil when exposed to air and how can this affect their therapeutic value?
104. What Bible scripture suggests that God's nature is expressed in the molecules of essential oils? What is one of God's principal qualities expressed through the molecules of essential oils?
105. What Bible scripture suggests that we can talk to plants and inanimate creation and learn from them directly? In light of this scripture, can knowledge of the therapeutic benefits of plants and their oils ever be truly lost? If not, how can this be? And if it can always be rediscovered, how and by whom can it be rediscovered?
- 106. Name two required texts where prescription drugs are discussed?**
107. How do prescription and over-the-counter drugs work on a cellular level and why do they all have undesirable side effects? What does the Bible have to say about "drugs from a pharmacy?" (Give the Bible book and verses.) What is the Greek root for the New Testament word in English translated as, "sorcery?"
108. How do pharmaceutical chemists manipulate natural molecules into synthetic ones that can be patented? Why do synthetic molecules always have undesirable side effects whereas natural ones normally do not?

109. Why is it that when one takes several drugs at once there is a high probability of an adverse drug interaction?
110. How do essential oils work on a cellular level and why is it that even when many oils are used, simultaneously, there are rarely, if ever, any adverse interactions or side effects?
111. Define the meaning of true healing vs. symptomatic relief. Where does disease actually begin, in the mind and spirit or in the physical body? In light of this, then, where does true healing have to begin? Can limiting oneself to working only from the physical/chemical side of our beings bring about true healing?
112. Explain how pharmaceuticals mask symptoms and block true healing while therapeutic oils facilitate true healing. In other words, discuss the action of synthetic drugs vs. natural therapeutic grade essential oils.
113. What does New Testament scripture have to say about pharmaceuticals or drugs from a pharmacy? What is the Greek root of the words pharmaceutical and pharmacy? What is the usual Bible translation of this Greek root as found in Galatians?
- 114. Is Raindrop Technique as taught in CARE Classes, described in CARE Class notes, and presented on the CARE video/DVD the same as versions published in the Essential Oils Desk Reference (EODR) and/or Reference Guide to Essential Oils (RGE)?**
115. Why, since its beginning in 2001, has CARE taught only one version of raindrop in its seminars?
116. How long must an official CARE Raindrop I class be (in hours) and what would be a course outline in terms of demonstration, lecture, and hands-on. How does a CARE Raindrop I Class differ from a CARE Raindrop II?
117. Raindrop Technique, as taught by CARE, was originated and taught by whom in the year 2000 with over 1000 people trained in that session. Who sponsored the training and in what city did it take place?
118. Does CARE require that you use only the version of raindrop taught by CARE in your own practice?
119. Name at least eight general sources of toxins in the body (such as prescription drugs, chlorinated water, shampoos, cosmetics, cigarette smoke, household cleaners, etc.).
120. Name at least three occupations that would be at high risk of exposure to toxins (such as hair dresser, auto body painter, etc.).
121. How would you explain to a potential raindrop client that, among other things, the procedure is a detoxifying process? In other words, how would you explain to them what to expect and the importance of drinking adequate amounts of good clean water, and the possible use of a cleansing regimen like the Cleansing Trio, etc. Specifically, how much daily drinking water should you recommend?
122. Besides the topic of detoxification (previous question), summarize the points and information you need to cover with a client before doing a raindrop.
123. What questions, if any, should you ask about a client's medical or health history prior to raindrop?
124. Do you think it is a good idea to have clients sign a release form prior to raindrop? If so, what points should be on the release form?

125. Before doing a raindrop, you were to find out that the client has a history of allergies, what precautions would you take to minimize the possibility of a reaction to the oils in the form of a skin rash or other symptoms? Would muscle testing be of value in such situations?
126. Is it possible to have an allergic reaction to a pure, therapeutic grade essential oil? What non-allergenic reactions can a person have following the administration of therapeutic grade essential oils?
127. What is an allergy? And how does an allergic reaction differ from a detox reaction?
128. Would there be a situation where you might advise a client to go through a month of cleansing (like the Cleansing Trio), drinking of lots of water, avoidance of toxic fluids like coffee and soda, etc. before receiving a raindrop?
129. On a potentially toxic raindrop client, what procedures might you add that would facilitate his or her colon functions? And what oils might you use with such procedures?
130. How would you explain the situation to the client if, afterwards, they had a problem (eg. Rash, nausea, fatigue, etc.) that seemed to result from the oils? What would you recommend for them to do, if anything, to remedy the situation?
131. Define what is meant by these terms: “diagnosing”, “prescribing”, and “making medical claims”. You may illustrate by examples. Also, who or under what circumstances can one legally diagnose, prescribe or make a medical claim?
132. Explain how a person who is not licensed as a health professional can avoid legal problems when asked for information by clients about specific ailments or conditions? In other words, if you are not licensed to diagnose or prescribe, how do you answer people who ask you medical questions of a specific nature involving themselves and who ask for your advice or recommendation?
133. By what program offered exclusively through CARE can an individual, who is not a licensed health professional, legally practice raindrop and charge for their services throughout Canada and the U.S.?
134. What three courses or programs will you be authorized to teach for credit in the name of CARE upon completion of your certification as a CCI?
135. Can CARE classes be taught entirely by showing one or more of the CARE videos/DVDs? Can one use projectors or power point presentations in an official CARE Class?
136. If CARE audiovisuals are not intended to substitute for live teaching in official CARE classes, what is the intended function of the CARE videos/DVDs? i.e., How do the CARE videos on Raindrop and Vitaflex tie in with the live instruction in class?
137. How long (in hours) must an official CARE Raindrop class be? Outline the format of the class. i.e. What you would do first, second, third, etc. and what parts would be lecture, demonstration, and hands-on. What would be the most students a teacher could handle single-handedly?
138. How long (in hours) must an official CARE Vitaflex class be? Outline the format of the class. i.e. What you would do first, second, third, etc. and what parts would be lecture, demonstration, and hands-on. What would be the most students a teacher could handle single-handedly in a CARE Applied Vitaflex Class?

139. If, as a Supervising CCI, you have more students than you can handle (more than 10) desiring to take one of your raindrop or vitaflex classes, besides arranging for another CCI to assist you, whom else would qualify to help in an official CARE class for CARE credit? Would people qualify as assistants who have had raindrop training elsewhere, but not CARE classes? Would a CCI Candidate qualify to assist? How about a CCA? A Qualified CCA? A CI? With qualified assistants, how many additional students can you accept and stay within CARE guidelines on class size? Can a CCI (not a Supervising CCI) accept assistants?
140. When a Supervising CCI has CARE Class Assistants, who bears the responsibility that the students receive quality training and sufficient one-on-one attention?
141. In the return demonstration 3-4 hours are normally required. Besides Raindrop, what Vitaflex techniques are to be demonstrated? Would these be the same as those required in fulfilling Requirements 6 & 8? If so, list them. Can a CCI proctor a Return Demo? Or does it take a SCCI or FCCI to perform this function? In making the decision as whether a CCI Candidate has passed or not, who must be consulted before the decision is made?
142. In doing a return demonstration, is there customarily a fee paid to the Examining SCCI? Whose responsibility is it to see that the oils, towels, sheets, massage table, and client are provided?
143. Name and list the four requirements by number necessary to become a CCI that are proctored or graded by SCCIs or by CARE Headquarters as pass/fail exams. In each instance, in the case of failure, what are the Candidates options if they still want to pursue completing the certification program?
144. What are your responsibilities with regard to notifying CARE of your upcoming classes so that CARE can include them in the CARE Calendar and web page in a timely way?
145. What is CARE's web page address? What is CARE's email address? What is CARE's mailing address?
- 146. What is the full title of the only study published, to date, on the Raindrop Technique of Aromatherapy? How many pages long it is?**
147. How many respondents returned questionnaires in Statistical Validation of Raindrop? How many were women? How many were men? How many were licensed professionals? How many were massage therapists (either certified, licensed or registered)? How many were registered nurses? And how many were MDs, Dos, naturopaths, or chiropractors?
148. In Statistical Validation of Raindrop, how many respondents were receivers of raindrop, what was the average number of raindrops received, and what was the total number of raindrops received?
149. Statistical Validation of Raindrop, how many respondents were facilitators of raindrop, what was the average number of raindrops performed, and what was the total number of raindrop sessions reported?
150. Among those receiving raindrop in *A Statistical Validation of Raindrop*, what were the percents in the following seven categories of responses: Positive, Pleasant, Resulted in a Healing, Felt better afterwards, State of health improved, Emotional state improved, and Would receive it again?
151. In the Validation of Raindrop Study, how many commentaries were tabulated? Select five of these commentaries that you consider the most significant and/or informative to you and explain why.

152. Explain how you might find practical uses for *A Statistical Validation of Raindrop* in your practice of raindrop.
153. What are CRP, BCRS, and LSH? Give the scope of practice for each CRP and BCRS? How does a combination of CRP/LSH or BCRS/LSH make it legal for you to practice raindrop without any other license throughout the U.S. and Canada? What is the name of the organization through which CRP and BCRS are issued?
154. What course must one take prior to receiving LSH? What is the cost of that course and where do you access information on it via the internet? What is the name of the organization through which LSH is issued?
155. How soon do you intend to complete your certification and become a CCI? In other words, do you have prospective dates in mind for your Internship Class? If so, what are they and where would you like to do the class? Do you have a specific Supervising CCI chosen to be your mentor and Internship Class Proctor? If so, who? You have 12 months as a CI to complete your Internship Class. If you don't do so within 12 months, what are your options?
156. What are your plans to organize, offer, publicize, and teach CARE courses during the first twelve months after becoming a CCI? Do you plan to become ER-authorized? Chem-Authorized? An SCCI? A FCCI? If so what sort of time frame do you have in mind for accomplishing your goals.
157. For the long term, what do you hope to accomplish as a Certified CARE Instructor over the next ten years, the people you want to reach, the places you want to teach, etc.?

**END OF EXAM**

I, \_\_\_\_\_ (print name), certify that the enclosed answers for this exam are my own work.

Signed \_\_\_\_\_ (signature) Date \_\_\_\_\_