



In accordance with the IPNFA 2008 rule for IPNFA Assistants to have a minimum of 600 hours of patient treatment per year, I submit that the following information is true.

I understand that I may need to send proof of these hours at the request of IPNFA.

Name:

Year:

Hours of Clinical practice
in total:

- ☐ 7 – 10 hours per week [minimum]
- ☐ 10 – 20 hours per week
- ☐ 20 – 30 hours per week
- ☐ 30 – 40 hours per week
- ☐ Neurologic pts
- ☐ Orthopaedic pts
- ☐ Rheumatological pts
- ☐ Geriatric pts
- ☐ Children