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| --- | --- | --- | --- | --- |
| **graduate certificate** **Taking Control Over Nicotine Addiction** | | | | |
| This certifies that | | | | |
| participant’s name | | | | |
| Has successfully completed the mentored course of behavior change to eliminate nicotine through nutrition, exercise, mindset, and God’s power | | | | |
| Date of Completion | | | | |
|  |  | Place Photo of Participant here |  |  |
|  | **Linda Royer, PhD, RN** | **FrameWork Health, Inc.** |  |