

THEIR PROCESS

How is their energy level

What spiritual practice might work for them?

## **CLIENT RECORD**

## ONLY TEN (10) TO BE SUBMITTED TO YOUR MI SUPERVISOR AT ANY ONE TIME

|  | Your Full Name   | Today's Date |                 | Your document #                   |  |  |  |  |  |  |
|--|--|--------------|-----------------|-----------------------------------|--|--|--|--|--|--|
|  | Client's First Name Age  | Born in      | M / F / Other   | # Times you have seen this client |  |  |  |  |  |  |
|  | 1. Who's here?   |              |                 |                                   |  |  |  |  |  |  |
|  | 2. Your deepest sense of what really is <i>troubling</i> them:                                     |              |                 |                                   |  |  |  |  |  |  |
|  | 3. Your deeper sense of what they really <i>need</i> :   |              |                 |                                   |  |  |  |  |  |  |
|  | 4. What is your sense of how you may be able <i>to be of service</i> to them?                      |              |                 |                                   |  |  |  |  |  |  |
|  | 5. Concerning yourself, how does your field change when you are in the presence of the client?     |              |                 |                                   |  |  |  |  |  |  |
|  | 6. Concerning the client, how does their field seem to change when they are with you?              |              |                 |                                   |  |  |  |  |  |  |
|  | 7. How would you describe the archetypal relationship that you and the client create, together?    |              |                 |                                   |  |  |  |  |  |  |
|  | 8. What was the client's intention, that is, what did the client say they wanted from the session? |              |                 |                                   |  |  |  |  |  |  |
| Blood Pressure Whiplash Injury Concussion Fractures Dislocations Medication Seizure Headache         |  |              |                 |                                   |  |  |  |  |  |  |
| Three Empowerments "Stop!!!" Three Statements Oral Work Can we Communicate? Do we have a Connection? |  |              |                 |                                   |  |  |  |  |  |  |
| PH   | YSIOLOGICAL PARTS  |              | PHYSIOLOGIC     | AL WHOLE                          |  |  |  |  |  |  |
| 1-   |  |              | Engineers Eyes  |                                   |  |  |  |  |  |  |
| 2-   |  |              | Artists Eyes    |                                   |  |  |  |  |  |  |
| 3-   |  |              | Approximate Hei | ght and Weight                    |  |  |  |  |  |  |

YOUR PROCESS

How is your energy level?

What spiritual practice works for you?

| How is their emotion  | How is your emotional state? |                   |        |                    |                        |           |  |  |  |
|---|------------------------------|-------------------|--------|--------------------|------------------------|-----------|--|--|--|
| Channel   | Technique or Touch           | Details of your T | f or T | Perceptions        | Observations           | Feedback  |  |  |  |
|   | reeningue or rouen           | Why               | 01 1   | rerecptions        | Objet vacious          | 1 coubuch |  |  |  |
| Hands   |                              | When              |        |                    |                        |           |  |  |  |
| rianus  |                              |                   |        |                    |                        |           |  |  |  |
|   |                              | Duration<br>Why   |        |                    |                        |           |  |  |  |
| Eye   |                              | When              |        |                    |                        |           |  |  |  |
|   |                              |                   |        |                    |                        |           |  |  |  |
|   |                              | Duration<br>Why   |        |                    |                        |           |  |  |  |
| Ear   |                              |                   |        |                    |                        |           |  |  |  |
|   |                              | When              |        |                    |                        |           |  |  |  |
|   |                              | Duration<br>Why   |        |                    |                        |           |  |  |  |
| Heart   |                              | _                 |        |                    |                        |           |  |  |  |
|   |                              | When              |        |                    |                        |           |  |  |  |
|   |                              | Duration          |        |                    |                        |           |  |  |  |
| Empath  |                              | Why               |        |                    |                        |           |  |  |  |
| •   |                              | When              |        |                    |                        |           |  |  |  |
|   |                              | Duration          |        |                    |                        |           |  |  |  |
| Air   |                              | Why               |        |                    |                        |           |  |  |  |
|   |                              | When              |        |                    |                        |           |  |  |  |
|   |                              | Duration          |        |                    |                        |           |  |  |  |
| Vagus   |                              | Why               |        |                    |                        |           |  |  |  |
| v agus  |                              | When              |        |                    |                        |           |  |  |  |
|   |                              | Duration          |        |                    |                        |           |  |  |  |
| How long was the  | e session?                   |                   | ,      | What Percentage of | the Session Devoted to | VCSW:     |  |  |  |
| D:1 .   | . 1                          |                   |        | 10 1 22            |                        |           |  |  |  |
| Did you give your client any 'Homework'?  If so, what was it?                                   |                              |                   |        |                    |                        |           |  |  |  |
|   |                              |                   |        |                    |                        |           |  |  |  |
| What did the client say ("complement, commentary, criticism") to you at the end of the session? |                              |                   |        |                    |                        |           |  |  |  |
|   |                              |                   |        |                    |                        |           |  |  |  |
| Anything else?  |                              |                   |        |                    |                        |           |  |  |  |
|   |                              |                   |        |                    |                        |           |  |  |  |
| What did you learn from this Session?   |                              |                   |        |                    |                        |           |  |  |  |