



The Leela School of Awakening

Client Practice Session Feedback Form

To be filled out by the Client

Name of True Friend:

Date of session:

1. What kind of questions did the True Friend ask at the beginning of the session, and was it helpful?

2. Did the True Friend establish and clarify something that was going on for you, as well as help you discover what you really wanted?

3. Did the True Friend guide you into a relaxed state?

4. If yes, how was it? Describe your experience of being guided into a relaxed state.

5. Did the True Friend guide you to discover something in a relaxed state?

6. If yes, how did they do this? Please describe in brief:

7. How was your experience?

8. What did you learn from the session?

9. What was the best part of the session?

10. Any part of the session that didn't work?

11. Was the True Friend in rapport with you throughout the session? In other words, did you feel connected to the True Friend the entire time?

12. Did they say or do anything that felt out of rapport or that was out of connection with you?

13. Would you recommend this person to someone you know?

14. Would you recommend this person to someone you know for a paid session?

15. Why?

16. Anything else?

I have read and understand the information provided regarding the core goals and values of the Leela School. I willingly give my consent that the processes, material and insights revealed in this session will be used for discussion, training and teaching purposes between my True Friend and their Leela School mentor(s) and teachers.

Name (print): _____

Signature: _____

Date: _____