

Kid Reiki Levels I & II Training Evaluation

Online or In-Person Class

Please help us gauge the effectiveness of this training and plan for future offerings by answering the following questions as completely as possible.

Name: _____

Mailing Address: _____

Email: _____

Class Location: _____ Dates (MM/DD/YYYY): _____

Instructor(s): _____

Attainment of Objectives

Please rate the teacher's effectiveness in leading each activity.

DAY ONE	5- EXCELLENT 1-POOR
1. Invocation	
2. Inner Child Discussion	
3. Inner Child Experience	
4. Kid Reiki Level I Placement	
5. Heal the Past with Reiki Today Experience	
6. History of Reiki	
7. Practice Sessions	
8. Child Development Concepts	

DAY TWO	5- EXCELLENT 1-POOR
1. Memory Exercise	
2. Releasing Shame Experience	
3. Activities	
4. Divine Heart Symbol: Explanation and how to draw	
5. Level II Placement	
6. Lake of Insight Experience	
7. Practice sessions using Kid Reiki and the Kid Reiki symbol	

I give permission to this teacher to use my comments in their advertising, using only my first name or initials. Yes ___ No ___

Additional comments:

Thank you!