

**KINEASY INTRO COURSE
CASE STUDY ASSESSMENT**

Student Name: _____

Course Dates: _____

KINEASY INTRO COURSE CASE STUDIES

Students are required to complete **6 entire Kineasy case studies** which are handwritten using the case study template form provided on next page (no typed case studies will be accepted). These must be completed outside of class and submitted to the assessor via email only in **one combined PDF** document for marking to achieve competency. **Please note no paper copies or photos of individual pages will be accepted.**

Please note: There are many scanning apps available to download for free that allow you to take multiple photos and convert to a PDF file.

10 marks per case study.

Kineasy Case Study 1 out of 10

Kineasy Case Study 2 out of 10

Kineasy Case Study 3 out of 10

Kineasy Case Study 4 out of 10

Kineasy Case Study 5 out of 10

Kineasy Case Study 6 out of 10

Total correct out of 60 Pass required 75% (45 correct)

KINEASY INTRO COURSE SESSION SHEET

Practitioner Name: _____ Case Study #: _____

Client Initials: _____ Age: _____ Date: _____

Physical Symptoms: _____

Emotional Stressors:

Clear	Want to Feel

Pre-Checks: Hydration | Central Meridian | Brain Switching | Nervous System | Thymus ___% - ___%

Willingness statements: Stress? Yes / No Correction: _____

Connection Points: Spirit | Mind | Body-Heart | Earth

Goal/Context: _____

_____ **Best Goal?:** Yes / No

Stress on Goal/Context: _____ **Suppression:** I/C? Yes / No

Age of Cause or Age of Best Understanding (circle): Age _____

Involvement: Self | Male | Female | Parents | Everyone | Circumstance | Spirit | Other

Who/What?: _____

Emotions: _____

Find a remedy and record below:

Correction Remedies:	Crystal: _____ Essential Oil: _____ Flower Essence: _____ Colour: _____ Sound: _____
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	Oracle/Healing Card: _____
	Wellbeing Balancing Oil: _____
	Clearing Spray: _____
	Affirmation: _____
	ESR: _____
	Other: _____

Recheck: *(Tick)*

- Emotions are clear, ie. no I/C.
- Area of involvement is clear, ie. no I/C.
- Age of cause or best understanding is clear, ie. no I/C.
- Suppression is clear, ie. no I/C.
- Physical symptoms clear, ie. no I/C.
- Goal / context is clear, ie. no I/C on emotional stressors.
- Stress on goal has reduced. Stress level now: _____

Home reinforcement: _____

Other Comments: _____

Participant Feedback: _____

Record information and ‘the story’ on relevance of what tested up including remedies in relation to client’s physical symptoms, emotional stressors and goal/context:
