AUTOBIOGRAPHY REQUEST

**1. Your Childhood**

* How was your birth? (as far as you know)
* What was each of your parents like?

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* Who was a major influence in your life? Ex. nanny, grandma, aunt?

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* How was your parents' relationship with each other?

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* How was your relationship with each parent?

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* Major wounds of your childhood...

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* Anything important not covered yet?

**2. Medical History**

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* Any medical birth issues?

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* Childhood illnesses, broken bones, etc.?

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* Adult medical history, allergies, and sensitivities?

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* Are you on any medication? Please name.

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* Do you use any other drugs, including alcohol?

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* Adult illnesses, conditions, and genetic conditions?
* Anything important not covered?

**3. Adult life - Issues you would like to cover**

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* Everything that has been wounding to you and you would like to change

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* Family issues

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* Relationship issues

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* Love life

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* Religious/ Spiritual Issues

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* Money issues

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* Work/career

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* Goals (both accomplished and not – and why you think you have not accomplished them)

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* Accomplishments

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* Anything important not covered yet

**4. Spiritual life**

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* The history, wounds, and blocks

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* Your mission or purpose (take a guess if you don’t know)

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* Something you have experienced spiritually that has moved and transformed you

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* Anything else not covered

**5. Any therapy, including energy healing and other alternative healing history**

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* What has worked for you? How?

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* What has not worked for you? Why do you think?

**6. What makes you want to enter healing based on Energy Psychology methods and techniques?**

**7. What do you want to accomplish during our sessions?**

**​**

***Enjoy the process!!***