



Deliberate Harmony

The Breakthrough Course

CIS

Course Information Sheet

Name _____
 Address _____
 City _____ State _____ Zip _____
 Home phone (____) _____
 Mobile phone (____) _____
 E-mail _____

Complete this form and return to:
 email: tbc@deliberateharmony.com
 or mail: **Deliberate Harmony, LLC**
 312 Paleface Point Dr.
 Spicewood, TX 78669
 For questions phone: 523.200.3334

You will help yourself in two ways by completing the following questions. First this CIS will provide our course instructors with information about you and your specific goals, values, and what you want to gain by participating. This will allow us to be more valuable to you during your course experience. We see you as an important person worthy of individual attention. The second way this form is helpful to you is to help you clarify your goals in your own mind. Many students discover that by the time they reach the course they have already made progress toward their goals just because they have taken the time to put them in writing. Your course has already begun!

Our course instructors and assistants will discuss the information you have provided and design an educational program to help you achieve, expand, and maintain your goals and objectives. This plan will help us focus on what YOU want to gain while in The Breakthrough Course. We may also suggest additional follow-up that will help you achieve your desires, and assist you in maintaining what you have accomplished.

It is our sincere desire that your course will be a source of extreme fulfillment for you and also give you an opportunity to enjoy being of value to the other students.

FAMILY INFORMATION - (Growing up living at home)

List the first name and age, oldest to youngest, of each family member in the spaces below. Check whether the person is a brother or sister, son or daughter. In the Other Info. column list a personality trait such as strong, sickly, outgoing, dominating, etc. If any of them are no longer living, write the cause of death in the Other Info. column and the year they died. Also, use the Other Info. column to indicate stepfamily.

Birthdate	You	Name	Age	Occupation	Other Info	Died
	You					
	Mother					
	Father					
	Oldest <input type="checkbox"/> Brother <input type="checkbox"/> Sister					
	Next <input type="checkbox"/> Brother <input type="checkbox"/> Sister					
	Next <input type="checkbox"/> Brother <input type="checkbox"/> Sister					
	Next <input type="checkbox"/> Brother <input type="checkbox"/> Sister					
	Next <input type="checkbox"/> Brother <input type="checkbox"/> Sister					
	Next <input type="checkbox"/> Brother <input type="checkbox"/> Sister					

Current Family (if different) Name	Age	Occupation	Other Info	Died
<input type="checkbox"/> Spouse <input type="checkbox"/> Partner				
Oldest <input type="checkbox"/> Son <input type="checkbox"/> Daughter				
Next <input type="checkbox"/> Son <input type="checkbox"/> Daughter				
Next <input type="checkbox"/> Son <input type="checkbox"/> Daughter				
Next <input type="checkbox"/> Son <input type="checkbox"/> Daughter				
Next <input type="checkbox"/> Son <input type="checkbox"/> Daughter				
Next <input type="checkbox"/> Son <input type="checkbox"/> Daughter				
Next <input type="checkbox"/> Son <input type="checkbox"/> Daughter				

Early Recollections

Print or type three early recollections. An early recollection is a memory of a very **SPECIFIC INCIDENT** that occurred when you were young.

Example of an early recollection:

Age 4-5 : One day I was riding my tricycle and my brother pushed me.
 I fell off. He laughed at me. I felt embarrassed.

Notice that the above recollection describes a specific incident. It is not a generalized report.

The following is NOT an early recollection:

When I was a kid I always used to ride my tricycle and fight with my brother.

It doesn't matter if the experiences you recall are positive or negative. Nor does it matter how far back you can remember, as long as they are your earliest memories. Write three recollections in the spaces below. Give your approximate age and describe how you felt.

Early Recollection #1 Approx. age _____

How you felt _____

Early Recollection #2 Approx. age _____

How you felt _____

Early Recollection #3

Approx. age _____

How you felt _____

Your Goals

What do you want to be different as a result of completing The Breakthrough Course?

State **SPECIFIC RESULTS** you want to produce in the areas of:

Work: _____

Love: _____

Friendship: _____

Is there anything else we should know about you that would enable us to help you accomplish your goals? _____

Additional Background Information

Current Employment Description _____

Describe your responsibilities _____

How are you valuable to your company? _____

Is your work fulfilling? Yes No

Are you satisfied with your income? Yes No

If No, how much would you like to increase your income? \$_____ per year month hour

Are you: Married Single Separated Divorced Widowed Living together

Describe your relationship. _____

Do you have children? _____ Describe your relationship with them. _____

Have you ever served in the armed forces? _____ Describe. _____

Have you ever had counseling? _____ What were the results? _____

What would have made the results more positive? _____

Do you have, or have you had, any major physical illnesses or injuries? _____

Are you presently taking any medication? _____ If so, what? _____

What other personal growth courses have you taken? _____

Challenges

What are the 3 biggest challenges in your life at this point in time?

1. _____

2. _____

3. _____

Life Purpose

What do you want to accomplish in the world by being alive? _____

Meeting People

Where do you go to meet new people? _____

About how many new people do you get to meet and converse with each month? _____

What are your goals to meet more friends? _____

I am aware that The Breakthrough Course is not a replacement for therapy and if I am currently in treatment with a psychologist, psychiatrist, medical doctor, or other medical therapist, it is my responsibility to make sure that any advice given in my course is not used by me to preempt their professional advice.

I agree to these terms and considerations. Signature _____ Date _____