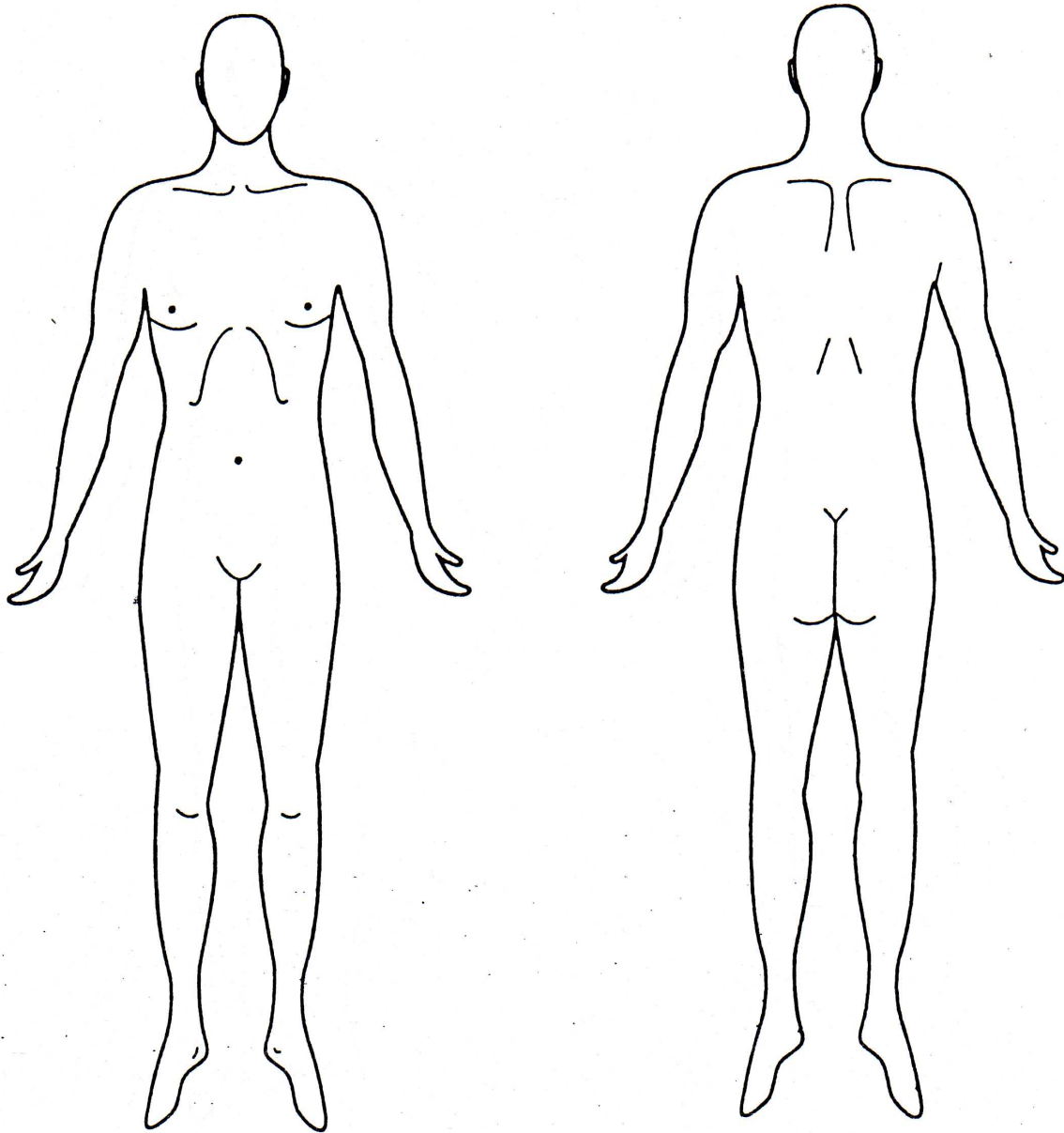


REIKI CASE STUDY FORM FOR STUDENTS
Reiki I – Reiki II 10 case studies
Reiki II – Reiki III 20 cases studies
Reiki III – Reiki Master/Teacher 30 case studies



RECORD ON THE BODY MAP ANY SENSATIONS, FEELINGS, EXPERIENCES
(Use carbon paper and give the client a copy if possible)

Date of Session: _____ Reiki Practitioner Name _____

Reiki Level Training _____

Initials of Client _____

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Intent for healing and any significant past issues shared (loss, grief, anger, divorce, abuse, physical and emotional illness, etc)

What did you feel, experience, sense, notice? What did the client say or notice?
