

Student Practitioner Case Study Form

Your Name *

First Name Last Name

Name of Client (first name only or pseudonym)

Date of Treatment



Month Day Year

Treatment # (5 per client req'd)

In filling out this form, please demonstrate what you do as a practitioner to integrate the "Global Body Attitude," meaning integrating the emotional, structural and metabolic aspects in your treatments.

Notes About Client (self-description, complaints, history, hopes for treatment...)

My Observations About the Client

Description of Treatment

Description of Teaching (techniques, exercises and meditations, advice...)

Possibilities for Next Treatment

What I Have Learned from This Treatment