

**The Healing Pathway**  
**Phase I: Introduction to the Healing Pathway**  
**Participant Evaluation of Instructors and Workshop Content**

Names of Instructors \_\_\_\_\_

Location \_\_\_\_\_ Date \_\_\_\_\_

**Phase 1 Objectives** This workshop will include the following:

1. Discussion of the primary principles for a healing ministry
2. Discussion of the traditional, scriptural, and spiritual sources of Christian centred healing
3. Brief introduction to the human energy system
4. Presentation and review of the Healing Pathway Code of Ethics, including boundaries
5. Discussion about the elements of self care that support the physical, emotional, mental, and spiritual well being of the practitioner
6. Centring and grounding through prayer and meditation, as preparation for offering healing hands
7. Experience of being a heart-centred instrument of healing
8. Description, demonstration, and practice of hands-on healing in a Healing Sequence and specific healing techniques, including the following:
  - Assessment (sensing/feeling the energy system)
  - Brush Down
  - Soaking Prayer
  - Full Body Balance
  - Magnetic Clearing
  - Sacred Chakra Spread
  - Localized techniques: Energetic Ultrasound, Energetic Laser, Drain for Pain
  - Introduction to distance healing
9. Discussion about the application of a ministry of healing within the church and community

**1. Were all the objectives covered? If not what was left out?**

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**2. Overall, how would you evaluate this workshop?**

From 1= Poor to 5 = Excellent (circle one)

Content ..... 1 2 3 4 5

Process ..... 1 2 3 4 5

**other side >>**

**3. What was the most significant part of the program for you?**

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**4. What would have made the program better?**

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**5. Instructor Team Evaluation 1= Poor, 5 = Excellent**

**Please evaluate the Instructor Team regarding the following:**

Ability to work well as a team. ....	1	2	3	4	5
Ability to communicate knowledge of the subject. ....	1	2	3	4	5
Effectiveness of teaching methods. ....	1	2	3	4	5
Ability to respond to questions. ....	1	2	3	4	5
Ability to stimulate participants. ....	1	2	3	4	5

**Comments for Instructors**

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**6. Additional comments about the workshop and your experience:**

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**Name (optional)** \_\_\_\_\_

Thank you!