

**WORKBOOK**



**Linda Joy Benn**

Balance Energy Nurture Nourish

**THE BENN**

**5R RENEWAL**

**PROGRAM**

by: Linda Joy Benn



**1. Please introduce yourself and what you hope to get out of the course.**

**2. What are your goals for this training program?**

**3. How do you feel?** Please rate how you feel at the start and at the end of the program.

1-If you possess low-level skills and abilities | 5 middle of the road | 10 if you possess high-level skills and abilities

1    2    3    4    5    6    7    8    9    10

**4. What have you in your life currently that you want to change?**

**5. What beliefs from your childhood have you held on to?**

**6. What do I believe about myself that I want to change?**

**7. What old trauma (if any) is still running your life today?**

**8. What losses have impacted my life and thinking processes?**

**9. What blame are you holding onto that is impacting your life?**

**10. What habits, addictions or behaviours that are hurting you?**

**11. Are you experiencing physical pain?**

**12. Are you suffering from stress that is physically affecting you?**

**13. Are you struggling with insomnia?**

**14. Are you suffering from any other health issues?**

**15. What emotion do you experience from your physical health issues?**

**16. What came to mind when you watched the videos of Dr Emoto?**

**17. Do you have a similar story?**

**18. What thoughts do you need to take responsibility for?**

**19. How effective was the Emotional Freedom Technique for you?**



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20. Think of events that have generated an emotion with you in the past. What kind of emotions come up for you when you are triggered?

[illegible]

**21. Are you achieving your desired goals and outcomes in life? List when you have failed to meet your goal and outcome and how it made you feel.**

Failed Goal/Outcome	The Emotion

**22. Do you feel happy, blissful, and content?**

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**23. What behaviours are not in alignment with your true self?**

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**24. Structurally, how are you walking?**

**25. Are you slumping your shoulders?**

**26. Do you have a straight spine?**

**27. How are you using your body to do daily tasks?**

**28. How is your body feeling when you move?**

**29. What are your Pain Points?**

Where	Shape	Colour	Emotion	Connected to/ emotion / purpose

**30. What is your diet like?**

**31. What kinds of food and drink are you ingesting?**

**32. Are these foods in alignment with your health and wellbeing or are they robbing your body of nutrition, energy and creating illness?**

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**33. What are your sleep patterns like?**

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**34. Is your nervous system in alignment with your energy or do you feel drained?**

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**35. Is your life force energy flowing through your body or do you feel restrictions or blockages energetically?**

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**36. Are your chakras aligned, open and free of lower vibration energy?**

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**37. Rate your mindset. 1 – very poor, 5 is neutral, 10 is extremely positive.**

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1   2   3   4   5   6   7   8   9   10

**38. How is Your Mental Health?**

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**39. Are you thinking positive thoughts or negative thoughts?**

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**40. What is your perception and outlook on your life?**

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**41. Are you achieving your goals and results that you desire?**

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**42. Are you in alignment with your purpose and vision?**

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**43. What beliefs do you have about the direction of your life?**

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**44. What are your thoughts about your body?**

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**45. Do you feel forgiveness for yourself and others?**

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**46. Are you in alignment with your higher self, your truth of who you are?**

**47. Write out the new movie script of what you want your life to look like (be specific).** Imagine it as richly as you can, experience the feelings around it. By linking your dreams with emotions, you will be more likely to achieve it and turn your dreams into reality.

- What do you want?
- What's important to me?
- What is my life/business purpose?
- What are the rules I live by?
- What's my perspective on life?
- How am I going to get to where I want to go?

**48. Which areas of your body need restoring?**

**49. Now that you have identified wherein your body is calling out for nurturing and nourishment, what changes will you act on?**

**50. Are there addictions that you choose to let go of in order to restore back to a healthy way of being?**

**51. Restore the relationship with yourself. Write yourself from 1 to 10 (1 is extremely poor and 10 is awesome)**

Self-love

Self-acceptance

Self-forgiveness

Self-nurturing

Self-awareness

Self-worth

**52. What makes your heart sing?**

**53. What is your happiness level on a scale of 1 to 10? (1 is extremely poor and 10 is awesome)**

**54. What can you do to restore your happiness and mojo?**

**55. What areas of your emotions do you need to restore?**

**56. What questions do you have for your higher self?**

**57. What brings you joy?**

**58. What makes you laugh?**

**59. Who are the positive happy people in your life?**

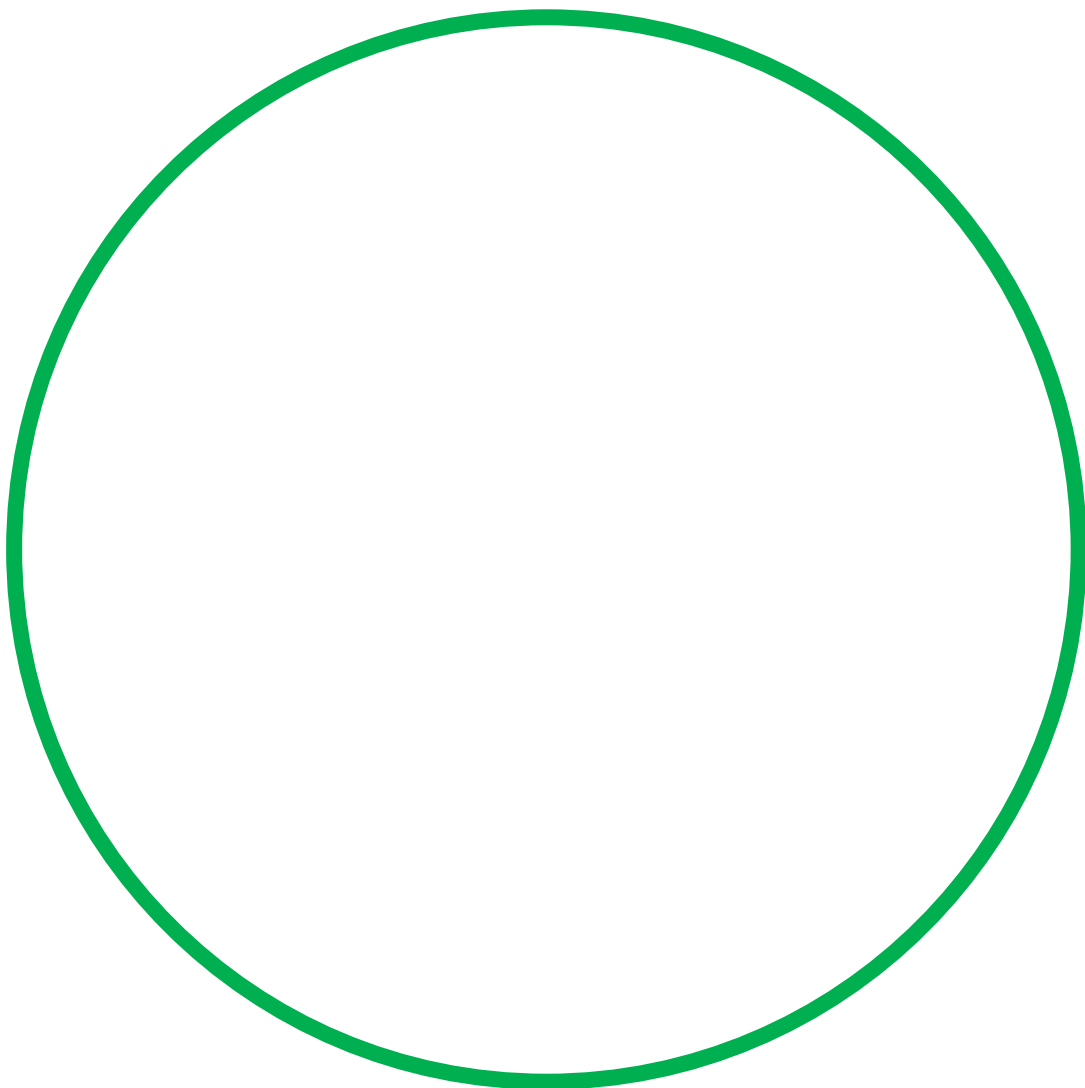
**60. Are there any relationships that you need to restore?**

**61. What does your inner child need right now?**

**60. What is this moment like when there is no problem to fix?**

**61. What does your inner child need at the moment?**

**62. In the following circle, draw a section of this pie that depicts how much time you are working, sleeping, spending time with family, doing fun activities, spending time on your self-care, meal preparation and exercise.**



**63. In what areas is there an imbalance?**

**64. What steps are you going to take to bring your work-life back into balance?**

**65. Imagine you have someone watching everything you do (you do it it is a creator or God or spirit) - like we talked about in the video... What advice do they have for you?**

**66. What do you need more of in your life?**

**67. What do you need less of in your life?**

**68. Are you experiencing heavy or dense energy that belongs to other people?**

**69. Thinking of your inner circle, are there friends or family members that you need to limit contact with as the relationships are toxic?**



**70. Thinking of your family dynamics, is it in balance, are all family members contributing to the household?**

**71. If the family dynamics are out of balance what can you do to change this?**

**72. Did you try the bubble exercise? If yes how effective did you find it**

**73. In each habit box pick three (3) different habits you want to create over the next 100 days. Tick off each day that you do what you have said you would do.**

Habit 1-				Habit 2-				Habit 3-			
AM		PM		AM		PM		AM		PM	
Day 1	Day 18	Day 1	Day 18	Day 1	Day 18	Day 1	Day 18	Day 1	Day 18	Day 1	Day 18
Day 2	Day 19	Day 2	Day 19	Day 2	Day 19	Day 2	Day 19	Day 2	Day 19	Day 2	Day 19
Day 3	Day 20	Day 3	Day 20	Day 3	Day 20	Day 3	Day 20	Day 3	Day 20	Day 3	Day 20
Day 4	Day 21	Day 4	Day 21	Day 4	Day 21	Day 4	Day 21	Day 4	Day 21	Day 4	Day 21
Day 5	Day 22	Day 5	Day 22	Day 5	Day 22	Day 5	Day 22	Day 5	Day 22	Day 5	Day 22
Day 6	Day 23	Day 6	Day 23	Day 6	Day 23	Day 6	Day 23	Day 6	Day 23	Day 6	Day 23
Day 7	Day 24	Day 7	Day 24	Day 7	Day 24	Day 7	Day 24	Day 7	Day 24	Day 7	Day 24
Day 8	Day 25	Day 8	Day 25	Day 8	Day 25	Day 8	Day 25	Day 8	Day 25	Day 8	Day 25
Day 9	Day 26	Day 9	Day 26	Day 9	Day 26	Day 9	Day 26	Day 9	Day 26	Day 9	Day 26
Day 10	Day 27	Day 10	Day 27	Day 10	Day 27	Day 10	Day 27	Day 10	Day 27	Day 10	Day 27
Day 11	Day 28	Day 11	Day 28	Day 11	Day 28	Day 11	Day 28	Day 11	Day 28	Day 11	Day 28
Day 12	Day 29	Day 12	Day 29	Day 12	Day 29	Day 12	Day 29	Day 12	Day 29	Day 12	Day 29
Day 13	Day 30	Day 13	Day 30	Day 13	Day 30	Day 13	Day 30	Day 13	Day 30	Day 13	Day 30
Day 14	Day 31	Day 14	Day 31	Day 14	Day 31	Day 14	Day 31	Day 14	Day 31	Day 14	Day 31
Day 15	Day 32	Day 15	Day 32	Day 15	Day 32	Day 15	Day 32	Day 15	Day 32	Day 15	Day 32
Day 16	Day 33	Day 16	Day 33	Day 16	Day 33	Day 16	Day 33	Day 16	Day 33	Day 16	Day 33
Day 17		Day 17	Habit?	Day 17		Day 17	Habit?	Day 17		Day 17	Habit?

**74. Who can be your accountable buddy?**

**75. How will you celebrate at the end of 33 days.**

**76. What do you feel that re energises and reinvigorates you?**

**77. What energy are you emitting when you walk into a room?**

**78. What is your superpower?**

**79. Name your genius or gift.**

**80. Write down what and who expands you?**

**81. What and who contracts you?**

**82. What is the goal? What specifically do you want to accomplish?**

<b>83. Why do you want to achieve this goal?</b>
<b>84. When do you expect to achieve this goal?</b>
<b>85. Where are you now in relation to this goal?</b>
<b>86. Who will be involved in helping you achieve this goal?</b>
<b>87. How will you accomplish this goal?</b>

## ACTION PLAN TO IMPLEMENT THE LEARNING INTO YOUR WORK AND LIFE

Goals to be achieved	Completion Date
Individual tasks to achieve the goals	Due Date
Resources needed – Who can help me?	
Barriers to Achieving my Goal	
Obstacle	Options:  Solution:

<b>When will I review this Plan?</b>			
<b>Development Activities and Experiences</b>			
<b>Activity</b>	<b>Action Steps</b>	<b>Success Measures</b>	<b>Completion Date</b>
<b>Notes:</b>			
<b>My Signature:</b>		<b>Dates:</b>	

**28. What are your goals now that you have completed this training program?**

**29. What have you achieved?**

**30. How will you apply the skills and techniques in your workplace and life?**

**31. How do you feel?**

Do you remember how you rated yourself at the start of the program? Let's see how you feel, now.

1 if you are stressed - 5 middle of the road - 10 if you are relaxed.

Rate how you feel now at the end of the program.

End of Program    1    2    3    4    5    6    7    8    9    10

**32. Please comment on the quality and relevance of the course content.**

**33. How would you rate the quality and relevance of the course content?**

Excellent | Good | Satisfactory | Poor | Very Poor

**34. Please comment on the presentation of the course content.**

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