

THE BURRIS LIFE COACH
CLIENT TRIALS - ADULTS

Certified Burris Life Coach -	Dr. Janis Smith	Start Date -	February 23, 2009
Administrator -	Cassie Hendon	End Date -	March 2, 2009
Statistical Analysis -	Cassie Hendon	Follow-Up Date -	

Females -	9	Average Age -	44	Sessions -	2
Males -	0	Average Age -		Number of Days -	2
				Total Time -	5 hours

Emotional Checklist	Number of Clients	Percent Improvement
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1) Do you find yourself worrying about family, friends, self, future Etc?	9	33%
2) Do you get self-critical and blame yourself for everything?	9	33%
3) Have you been feeling resentful or angry?	9	60%
4) Have you been feeling sad or down in the dumps?	9	67%
5) Do you feel inadequate or inferior to others?	9	33%
6) Does your future look hopeless?	9	60%
7) Do you feel worthless or think of yourself as a failure?	9	40%
8) Have you lost your interest in your career, hobby, family or friends?	9	25%
9) Do you feel overwhelmed and have to push yourself hard to do things?	9	33%
10) Do you think you look old or unattractive?	9	43%
11) Have you lost your appetite?	9	0%
12) Do you overeat or binge compulsively?	9	29%
13) Do you find it hard to get a good night sleep?	9	20%
14) Are you excessively tired and sleeping too much?	9	25%
15) Have you lost interest in sex?	9	0%
16) Do you have trouble making up your mind?	9	17%
17) Do you have thoughts that life is not worth living?	9	0%
18) Do you have feelings of hatred toward anyone, anything or yourself?	9	50%
Total	9	32%

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Behavior Control Checklist	Number of Clients	Percent Improvement
1) How would you rate your understanding of how the subconscious works?	9	50%
2) How would you rate your ability to unlearn subconscious programming?	9	50%
3) How do you rate your ability to regulate your emotional state?	9	33%
4) How much control do you feel you have over your subconscious?	9	60%
5) How would you rate your confidence in achieving your goals?	9	40%
6) How would you rate your ability to communicate effectively with yourself and other people?	9	0%
7) How would you rate the control you have over your eating habits?	9	25%
8) How would you rate your ability of self-motivation?	9	40%
9) How confident do you feel in making a permanent change in your food and fitness program?	9	20%
Total	9	35%

Relationship Satisfaction Scale	Number of Clients	Percent Improvement
1) Communication and openness with your partner?	9	14%
2) Resolving conflicts and arguments?	9	0%
3) Degree of affection and caring?	9	0%
4) Intimacy and closeness?	9	17%
5) Satisfaction with your role in the relationship?	9	0%
6) Satisfaction with your partner's role in the relationship?	9	-17%
7) Overall satisfaction with your relationship?	9	0%
Total	9	2%

*** Unanswered questions were not included in statistical analysis**