**T10 Establishing Resources for Support and Supervision**

**Your Name Date If you need more room use the back of the page to answer the questions.**

1. **Your intention for the whole training:** What do you want for yourself by taking this training? What do want for **yourself personally**?

What do you want for **yourself professionally**?

2. **Your intention for this module**: What do you want for yourself during this training module? What to you want **personally?**

What do you want **professionally?**

3. What support do you think you will need from **yourself** to support your personal and professionalintentions during this training module? Include your spiritual, mental, emotional and physical needs.

4. What support do you think you will need from your **peers** and your buddy to support your personaland professional intentions during the whole training? Include your spiritual, mental, emotional andphysical needs.

5. What support do you think you will need from your **family and primary relationships** during thismodule and the whole training? Include your spiritual, mental, emotional and physical needs.

6. What **professional support or supervision support** do you feel you will need during this training?During this module? Include your spiritual, mental, emotional and physical needs.

7. Is there anyone in this training with whom you have **dual or complementary relationships**? If yes, who are they?

8. What **boundaries** do you feel you need for yourself with the people you have dual or complementaryrelationships with? What do you plan to do to support clear an appropriate communication with thepeople you have dual relationships with in the training?

9. Look back at all these questions. Make a plan for how you will go about getting and receiving thesupport you need from yourself, your peers, your family, and from professional sources. What doyou plan to do in order to receive the support you need during this training module? Outline yourplan below and on the back of the page. When you are done, sign and date it. Have your dyadpartner sign and date it.

10. What are you willing to do **to support your peers** during the training?

Signed: Date: Witnessed by: Date: