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Summary and Active Recovery



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Integrate and Review

Flow Short Scale:

Think about your experience at work over the past week. On a scale of 1-5 please rate the extent to which the following are true during this time period: (1=Never, 2=Rarely, 3=Sometimes, 4=Frequently, 5=Always)

I feel I am competent enough to meet the demands of the situation.

I do things spontaneously and automatically without having to think.

I have a strong sense of what I want to do.

I have a good idea about how well I am doing while I am involved in the task/activity.

I am completely focused on the task at hand.

I have a feeling of total control over what I am doing.

I am not worried about what others may be thinking of me.

The way time passes seems to be different from normal.

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Notes

