

HUBBARD COMMUNICATIONS OFFICE  
Saint Hill Manor, East Grinstead, Sussex

HCO BULLETIN OF 24 APRIL 1969

Remimeo  
HGC Admin  
All Staff Auditors  
D of P

PRECLEAR ASSESSMENT SHEET  
ISSUE III

Who Does Assessment

The auditor assigned to audit the preclear does the assessment.

When is Assessment Done

This assessment is done at the beginning of each intensive the preclear has. If he is having 75 hours now, this Assessment Sheet is done at the beginning of the 75 hours. If the preclear comes back for a further 25 hours one week later, another Assessment Sheet is completed by the Auditor processing him whether it is the same auditor or not. The reason for this is the preclear changes, his memory improves, and things can have happened in that one week he was not processed.

Is this part of the Preclear's auditing time

Yes, it is. The questions asked are to a degree auditing because the Auditor is asking the preclear to look and to recall.

Purpose of Preclear Assessment Sheet

The purpose of this form is to establish auditor control over the preclear, to better acquaint the auditor with his preclear, and to provide essential information required.

Whom is the Preclear Assessment Sheet Routed

This Sheet is routed to the Director of Processing as soon as possible, at the first session break if the auditor can do so. It must be routed at least by the end of the auditing day. After the Director of Processing reviews the Sheet, it is returned to the auditor for keeping in his folder on the preclear.

Neatness of Preclear Assessment Sheet

If you cannot write plainly and neatly, print all the data required. Information is wanted, not mysterious cryptographics.

PRECLEAR ASSESSMENT SHEET

Name of Pc \_\_\_\_\_ Age of Pc \_\_\_\_\_ T.A. Position at Start of Assessment \_\_\_\_\_  
Auditor \_\_\_\_\_ D of P's Initials \_\_\_\_\_  
Family \_\_\_\_\_  
1. Is Mother living? \_\_\_\_\_ E-Meter reaction \_\_\_\_\_  
2. Date of Death \_\_\_\_\_ E-Meter reaction \_\_\_\_\_  
3. Pc's statement of relationship with Mother \_\_\_\_\_  
\_\_\_\_\_ E-Meter reaction \_\_\_\_\_  
4. Is father living? \_\_\_\_\_ E-Meter reaction \_\_\_\_\_  
Date of Death \_\_\_\_\_ E-Meter reaction \_\_\_\_\_  
6. Pc's statement of relationship with father \_\_\_\_\_  
\_\_\_\_\_ E-Meter reaction \_\_\_\_\_

7. List brothers, sisters, and other relatives of the Pc, date of death of any and E-Meter reaction:

<u>Relation</u>	<u>Date of Death</u>	<u>E-Meter Reaction</u>

**B. Marital Status:**

1. Married \_\_\_\_\_ Single \_\_\_\_\_ No. of times divorced \_\_\_\_\_  
2. Pc's statement of relationship with spouse \_\_\_\_\_

3. List any marital difficulties Pc presently has \_\_\_\_\_  
E-Meter Reaction \_\_\_\_\_

4. If divorced, list reasons for divorce and Pc's emotional feeling about divorce \_\_\_\_\_  
E-Meter reaction \_\_\_\_\_

5. List children, date of death of any child and E-Meter reaction. \_\_\_\_\_  
E-Meter reaction \_\_\_\_\_

<u>Children</u>	<u>Date of Death</u>	<u>E-Meter reaction</u>

**C. Educational Level:**

State the level of schooling Pc has had, University education, or professional training \_\_\_\_\_  
E-Meter reaction \_\_\_\_\_

**D. Professional Life:**

State main jobs Pc has held. \_\_\_\_\_  
Job \_\_\_\_\_ E-Meter reaction \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**E. Accidents:**

List any serious accidents Pc has had, the date of such, any permanent physical damage, and E-Meter reaction.

<u>Accident</u>	<u>Date</u>	<u>Physical Damage</u>	<u>E-Meter reaction</u>

**F. Illnesses:**

List any serious illness (excepting usual childhood diseases, colds, etc.) giving date of such, any permanent physical damage, and E-Meter reaction.

<u>Illness</u>	<u>Date</u>	<u>Physical Damage</u>	<u>E-Meter Reaction</u>

G. Operations:

List any operation, the date of each and E-Meter reaction.

_____	_____	_____
_____	_____	_____
_____	_____	_____

H. Present Physical Condition:

List any bad physical condition Pc presently has and E-Meter reaction to such.

<u>Physical Condition</u>	<u>E-Meter Reaction</u>
_____	_____
_____	_____
_____	_____

I. Mental Treatment

List any psychiatric, psycho-analytic, hypnotic, mystical or occult exercises, or other mental treatment which Pc has had, the date of the treatment and E-Meter

<u>Treatment</u>	<u>Date</u>	<u>E-Meter Reaction</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

J. Drugs

Are you taking any drugs currently?

<u>What Drug</u>	<u>Date (How Long)</u>	<u>E-Meter Reaction</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you ever taken drugs?

<u>What Drug</u>	<u>Dates</u>	<u>E-Meter Reaction</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

K. Disability Payment or Pension:

List any disability payment or pension received by the Pc, what it is for, how much and for how long it has been received.

<u>What For</u>	<u>How Much</u>	<u>Duration</u>	<u>E-Meter Reaction</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

L. Any Familial History of Insanity:

<u>Who</u>	<u>What</u>	<u>When</u>	<u>E-Meter Reaction</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

M. Medicines:

List any medicine currently or previously taken.

<u>What</u>	<u>When</u>	<u>E-Meter Reaction</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

N. Eyes

Any Tint in Eye White

Eye Colour

Colour Blindness

Glasses

<u>E-Meter Reaction</u>
_____
_____
_____
_____

O. BODY WEIGHT

E-Meter Reaction

Overweight? \_\_\_\_\_

Underweight? \_\_\_\_\_

P. ANY PERCEPTION DIFFICULTIES

What

E-Meter Reaction

Q. Any Perception Trouble in Family

E-Meter Reaction

R. Sick or Disabled Family

E-Meter Reaction

S. Earlier Allies or Close Friends

E-Meter Reaction

T. Husband or Wife Physical Troubles

What

E-Meter Reaction

U. Attitude towards Illness

E-Meter Reaction

V. Attitude towards Treatment

E-Meter Reaction

W. Any Current Treatment in Progress

E-Meter Reaction

X. Compulsions, Repressions and Fears

List any compulsions (things pc feels compelled to do), repressions (things pc must prevent himself from doing) and any fears of pc.

Compulsions, Etc.

E-Meter Reaction

Are you trying to change something someone else doesn't like?

Y. Criminal Record:

List any crime comitted by pc, prison sentence, if any, and E-Meter reactions:

Crime

Sentence

E-Meter Reaction

_____	_____	_____
_____	_____	_____
_____	_____	_____

2. Interest and Hobbies:

List any interests and Hobbies of pc.  
Interest and Hobbies

E-Meter Reaction

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ARE YOU HERE ON YOUR ON SELF DETERMINISM?

AA. Previous Scientology Processing:

1. List auditors, hours, and E-Meter reaction to any processing done other than in the HGC or Academy.

Auditor

Hours

E-Meter Reaction

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. List briefly process run \_\_\_\_\_

3. List goals attained from such processing \_\_\_\_\_

4. List goals not attained from such processing \_\_\_\_\_

BB. Present Processing Goals:

List all present goals of pc and E-Meter reaction to each.

Goal

E-Meter Reaction

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tone arm Position at end of Assessment

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for  
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