

HUBBARD COMMUNICATIONS OFFICE  
Saint Hill Manor, East Grinstead, Sussex

HCO BULLETIN OF 24 NOVEMBER 1973RF

C1 IV Grad  
Checksheet

ISSUE I

REVISED 26 JULY 1986

C1 VI  
Checksheet

REISSUED 20 OCTOBER 1987

C/Ses

C1 IV Grad and  
above Auditors

(Only changes are format  
corrections in the heading  
and signatory section.)

C/S Series 53RM LF  
(Long Form)

HI-LO TA ASSESSMENT C/S

The C/S Series 53 Long Form is used to get a TA up or down into normal range or to correct case outnesses. It is exactly the same as the C/S Series 53 Short Form except that it puts the items into full questions so a pc relatively new to auditing can understand what is being asked.

Assess this list Method 5 and handle reads in the order they occur on the list. When taking the list to F/Ning assessment, it is reassessed Method 5 until the entire list F/Ns. The C/S 53 is never assessed Method 3.

HCOB 30 Oct 78R, C/S SERIES 53, USE OF, contains data vital to the proper use of the C/S Series 53. Also HCOB 4 Jul 79, HANDLING CORRECTION LISTS ON OTs, applies when the list is being used on an OT III or above.

PC NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

- |   |   |
|---|---|
| A. Interiorized into something? _____                       | Have you been given a wrong indication? _____                   |
| Go in? _____  | Have you been given a wrong PTS item? _____                     |
| Went in? _____  | C. Do you have an ARC break? _____                              |
| Put in? _____   | Do you have a problem? _____                                    |
| Want to go in? _____  | Are you withholding anything? _____                             |
| Can't get in? _____   | Is there some sort of withhold? _____                           |
| Can't go in? _____  | Is there something you're not saying? _____                     |
| Want to get out? _____                                      | Has someone said you had a withhold when you didn't? _____      |
| Kicked out of spaces? _____                                 | Did you have to get the same withhold off more than once? _____ |
| Being trapped? _____  | Have you committed any overts? _____                            |
| Forced in? _____  | Have you been audited over out-rudiments? _____                 |
| Pulled in? _____  | Do you feel sad? _____  |
| B. Have there been list errors? _____                       | Do you feel rushed? _____                                       |
| Have you had an overlisted list? _____                      | Are you upset? _____  |
| Have you been given any wrong items? _____                  | Are you tired? _____  |
| Have you felt upset with giving items to the auditor? _____ |   |
| Have you been given a wrong date? _____                     |   |
| Have you found a wrong location? _____                      |   |
| Have you been given a wrong Why? _____                      |   |

- |   |       |   |       |
|---|-------|---|-------|
| Deadness?   | _____ | Couldn't you understand what was being said?    | _____ |
| Unconsciousness?  | _____ | Couldn't you understand what was being done?    | _____ |
| Do you feel like you can't get it?                          | _____ | Do you feel attacked?                           | _____ |
| Are you protesting anything?                                | _____ | Has there been something wrong with F/Ns?       | _____ |
| Is there something you don't like?                          | _____ | Have F/Ns been overrun?                         | _____ |
| D. Have you taken drugs?                                    | _____ | Have F/Ns been missed?                          | _____ |
| Have you taken LSD?   | _____ | Do you feel like items didn't really read?      | _____ |
| Have you drunk alcohol?                                     | _____ | Have there been false reads?                    | _____ |
| Have you smoked pot?  | _____ | Reading items were ignored?                     | _____ |
| Have you taken medicine?                                    | _____ | Have you had bad auditing?                      | _____ |
| E. Is there an engram in restimulation?                     | _____ | Are there any incomplete actions?               | _____ |
| Has the same engram been run twice?                         | _____ | Has there been any invalidation?                | _____ |
| Can't you see engrams too well?                             | _____ | Has there been any evaluation?                  | _____ |
| When you look for incidents is it invisible?                | _____ | Couldn't you get auditing?                      | _____ |
| When you look for incidents is it all black?                | _____ | Have actions been interrupted?                  | _____ |
| Have you experienced a loss?                                | _____ | K. Is there something you can't have?           | _____ |
| Have you lost something?                                    | _____ | Is your havingness low?                         | _____ |
| F. Has the same thing been run twice?                       | _____ | L. Are you PTS?                                 | _____ |
| Has the same action been done by another auditor?           | _____ | Do you feel suppressed?                         | _____ |
| G. Are you doing something with your mind between sessions? | _____ | M. Has something gone on too long?              | _____ |
| Are you involved in some other practice?                    | _____ | Have you been audited past a release point?     | _____ |
| H. Have there been Word Clearing errors?                    | _____ | Have you gone past Dianetic Clear?              | _____ |
| Is there a misunderstood word?                              | _____ | Has something been overrun?                     | _____ |
| Have there been misunderstandings in session?               | _____ | Has the auditor kept on going?                  | _____ |
| Have there been any study errors?                           | _____ | Have you been overrepaired?                     | _____ |
| I. Do you have a false TA?                                  | _____ | Are you puzzled why the auditor keeps on going? | _____ |
| Have you used the wrong-sized cans?                         | _____ | Are there stops?                                | _____ |
| Do your hands get tired?                                    | _____ | N. Is there something else wrong?               | _____ |
| Are your hands dry?   | _____ | Are you physically ill?                         | _____ |
| Are your hands wet?   | _____ | O. Are we repairing a TA that isn't high?       | _____ |
| Do you loosen the can grip?                                 | _____ | Are we repairing a TA that isn't low?           | _____ |
| Are you using the wrong cream?                              | _____ | Has the meter been faulty?                      | _____ |
| J. Is the auditor overwhelming?                             | _____ | Is there nothing wrong?                         | _____ |
| Couldn't you hear the auditor?                              | _____ | P. Have there been false Exam reports?          | _____ |
|   |       | Did you have to wait at Exams?                  | _____ |
|   |       | Have you been upset by the Examiner?            | _____ |

A. If A or any of the A group reads on ANY pc (including Clears, OTs) who has had an Int RD, do an Int RD Correction List Revised (HCOB 29 Oct 71RA) and handle the reads. If Int correction has already been done on the pc, get an FES on the Int RD AND its corrections. When all errors are corrected, the C/S may order the End of Endless Int Repair RD per Int RD Series 4RA, THE END OF ENDLESS INT REPAIR RUNDOWN.

If the pc is Clear or OT and has not had an Int RD, do the End of Endless Int Repair RD. Do not run any Dianetics.

Otherwise, if the pc has never had an Int RD, give him a standard Int RD per Int RD Series 2, EXTERIORIZATION AND HIGH TA — THE INTERIORIZATION RUNDOWN REVISED.

WHEN DOING AN INT HANDLING, RUN ONLY THE INT BUTTONS GIVEN ON THE INT RD SERIES HCOBs. Note on the assessment which button(s) have just read on the C/S 53. Other items in the A group are designed to detect out-Int but don't embrace the earlier beginning, so do NOT run these.

B. If any of these read, do an L4BRA on the earliest lists you can find that have not been corrected. Lacking these, do an L4BRA in general. You can go over an L4BRA several times, handling each read to F/N until the whole L4BRA gives nothing but F/Ns. Handle a wrong Why or wrong indication or wrong PTS item per C/S Series 78.

C. Any reading item must be F/Ned. Use standard handlings on rudiments questions. On "Out-Ruds" find which rud and handle. "Feel Sad" = ARC break of long duration so handle the ARC break. If "Deadness" or "Unconsciousness" read, 2WC to F/N (E/S if necessary) and then program for the Personal Revival Rundown.

D. 2WC to F/N. Do a Drug RD Repair List if the pc has had his Drug RD (HCOB 19 Sep 78R II, THE END OF ENDLESS DRUG RUNDOWNS REPAIR LIST). L3RG if needed. Advance Program to handle all reading drugs as soon as possible per NED Series 9RB, DRUG HANDLING. (The above handling does not apply to Clears and OTs. On these, indicate the read. See HCOB 30 Oct 78R, C/S SERIES 53, USE OF, for further data on the handling of Dianetics questions which are reading on Clears and OTs.)

E. If any of these read, do a L3RG and handle per the instructions. (On Clears and OTs simply indicate the read. Don't run any engrams or seek further to repair. See HCOB 30 Oct 78R, C/S SERIES 53, USE OF.)

F. Clean up any protest and inval and rehab to F/N.

G. Find out what it is. If yoga or mystic exercises or some such, 2WC E/S it to first time done, find out what upset had occurred before that and, if TA now down, do L1C on that period of pc's life.

H. If Word Clearing, do a Word Clearing Correction List, handle all reads. If study errors, 2WC E/S to F/N, and add a Student Correction List to the pc's program.

I. False TA is wrong cans or other error. Use HCOB 12 Nov 71RB, FALSE TA ADDITION; HCOB 15 Feb 72R, FALSE TA ADDITION 2; HCOB 18 Feb 72RA, FALSE TA ADDITION 3; HCOB 21 Jan 77RB, FALSE TA CHECKLIST; HCOB 23 Nov 73RB, DRY AND

WET HANDS MAKE FALSE TA, all on false TA. Then clean up the bypassed charge with (1) Assess for best read, (a) TA worries, (b) F/N worries; (2) Then 2WC times he was worried about (item) E/S to F/N; (3) Rehab any overruns due to false TA obscuring F/Ns.

J. These are auditor errors. Low TA is generally caused by overwhelming TRs and incomplete actions. A high TA can be caused by an auditor overrunning F/Ns or failing to call them. Or trying to assess through an F/N and mistaking an F/N right swing for a read. An F/N can be obscured and mistaken for a read if sensitivity too high. These items are all 2WC E/S to F/N. Auditors who made them need cramming badly or retread. Rehab F/Ns that have been missed.

K. Can't have or havingness. Find correct Havingness Process and remedy.

L. 2WC to F/N. C/S to program as needed for further PTS handling.

M. Find out what. Clean up any protest. Rehab to F/N or Date/Locate. On "Have you gone past Dianetic Clear?" 2WC to F/N. Return to C/S. A qualified C/S who has fully checked out on the materials must adjudicate whether this state has been attained before the preclear may attest to Dianetic Clear.

N. 2WC to find what. Note BD item. If BD item covered by one of these categories, handle per instructions. If not, just 2WC to F/N and get further C/S instructions for handling if necessary.

O. Get pc to tell you about it briefly. If correct, then indicate to F/N. Go E/S and indicate it if no F/N on first. If false TA, handle per I above.

P. Indicate and 2WC to F/N.

Per HCOB 30 Oct 1978R, C/S SERIES 53, USE OF, the order in which reads are to be taken up is built into the C/S 53 itself. You simply start at the top of the list and take up and handle to F/N each read as you come to it.

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Revision assisted by  
LRH Technical Research  
and Compilations

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