EMDR/Trauma Therapy Feedback Form

We'd love to invite you to share a few reflections and feedback in this short form. Your words may help others who are considering EMDR or trauma therapy, and they also support your provider in continuing to grow and improve care. Feel free to share whatever feels true for you—there are no right answers here.

YOUR EXPERIENCE

On a scale of 1-5, how supported did you feel during therapy?

1 2 3 4 5

How comfortable did you feel with the process of therapy?

1 2 3 4 5

How much progress do you feel you made during therapy?

1 2 3 4 5

REFLECTIONS

What part of therapy felt most helpful—or less so?

What might you say to someone considering EMDR or trauma therapy?

Have you noticed any shifts emotionally, physically, or otherwise since starting therapy?

Anything else you'd like to share or reflect on?

CONSENT TO SHARE

Your reflections might help others who are just beginning. If you're comfortable, I may share a line or two of what you've written—anonymously, without your name or personal details—on my website or with future clients.

Consent to share reflections

◯ Yes, I'm comfortable with you sharing my words anonymously. ◯ No thank you, I prefer to keep this private.

Thank you for sharing your experience. Your insight matters—and may help someone else feel a little less alone in starting their own journey.