

HUBBARD COMMUNICATIONS OFFICE
Saint Hill Manor, East Grinstead, Sussex

HCO BULLETIN OF 24 NOVEMBER 1973RE
REVISED 30 OCTOBER 1978

CI IV Grad Checksheet
CI VI Checksheet
C/Ses
CI IV Grad and
above Auditors

C/S SERIES 53RL

(Long Form)

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.

HCOB 30 Oct 78, C/S SERIES 53, USE OF contains data vital to the proper use of the C/S Series 53.

PC NAME: _____

DATE: _____

AUDITOR: _____

A. Interiorized into something?

Go in?

Went in?

Put in?

Want to go in?

Can't get in?

Can't go in?

Want to get out?

Being trapped

Forced in?

Pulled in?

Pushed in?

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

B. Have there been list errors?

Have you had an over-listed list?

Have you been given any wrong items?

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?

Have you been given a wrong indication?

Have you been given a wrong PTS item?

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

- C. Do you have an ARC break? _____
- Do you have a problem? _____
- Are you withholding anything? _____
- Is there some sort of withhold? _____
- Is there something you're not saying? _____
- Has someone said you had a withhold when you didn't? _____
- Did you have to get the a same withhold off more than once? _____
- Have you committed any overts? _____
- Have you been audited over out-rudiments? _____
- Do you feel sad? _____
- Do you feel rushed? _____
- Are you upset? _____
- Are you tired? _____
- Deadness? _____
- Unconsciousness? _____
- Do you feel like you can't get it? _____
- Are you protesting anything? _____
- Is there something you don't like? _____

- D. Have you taken drugs? _____
- Have you taken LSD? _____
- Have you drunk alcohol? _____
- Have you smoked pot? _____
- Have you taken medicine? _____

- E. Is there an engram in restimulation? _____
- Has the same engram been _____
- Run twice? _____
- Can't you see engrams too well? _____

- When you look for incidents is it invisible? _____
- When you look for incidents is it all black? _____
- Have you experienced a loss? _____
- Have you lost something? _____
- F.** Has the same thing been run twice? _____
- Has the same action been done by another auditor? _____
- G.** Are you doing something with your mind between sessions? _____
- Are you involved in some other practice? _____
- H.** Have there been Word Clearing errors? _____
- Is there a misunderstood word? _____
- Have there been misunderstands in session? _____
- Have there been any study errors? _____
- I.** Do you have a false TA? _____
- Have you used the wrong sized cans? _____
- Do your hands get tired? _____
- Are your hands dry? _____
- Are your hands wet? _____
- Do you loosen the can grip? _____
- Are you using the wrong cream? _____
- J.** Is the auditor overwhelming? _____
- Couldn't you hear the auditor? _____
- Couldn't you understand what was being said? _____
- Couldn't you understand what was being done? _____
- Do you feel attacked? _____

Has there been something wrong with F/Ns? _____

Have F/Ns been overrun? _____

Have F/Ns been missed? _____

Did you feel like items didn't really read? _____

Have there been false reads? _____

Have you had bad auditing? _____

Are there any incomplete actions? _____

Has there been any invalidation? _____

Has there been any evaluation? _____

Couldn't you get auditing? _____

Have actions been interrupted? _____

K. Is there something you can't have? _____

Is your havingness low? _____

L. Are you PTS? _____

Do you feel suppressed? _____

M. Has something gone on too long? _____

Have you been audited past a release point? _____

Have you gone past Dianetic Clear? _____

Has something been overrun? _____

Has the auditor kept on going? _____

Have you been over repaired? _____

Are you puzzled why the auditor keeps on going? _____

Are there stops? _____

- N. Is there something else wrong? _____
- Are you physically ill? _____

- O. Are we repairing a TA that isn't high? _____
- Are we repairing a TA that isn't low? _____
- Has the meter been faulty? _____
- Is there nothing wrong? _____

- 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 Dianetic Clears, Clears, OT's) who has had an Int RD, do an Int RD Correction List Revised (HCOB 29 Oct. 1971 BRA) 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 4.

If the PC is Clear, Dianetic 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.

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 L4BRB on the earliest lists you can find that have not been corrected. Lacking these, do an L4BRB in general. You can go over an L4BRB

several times handling each read to F/N until the whole L4BRB 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 2 way comm. to F/N (E/S if necessary) and then program for the Personal Revival Rundown.

- D. 2 way comm. to F/N. Do a Drug RD Repair List if the PC has had his Drug RD. (HCOB 19 Sep 78 II) L3RF if needed. Advance Program to handle all reading drugs as soon as possible per NED Series 9R. (The above handling does not apply to Clears and OT’s. On these, indicate the read. See HCOB 30 Oct 78, C/S SERIES 53, USE OF for further data on the handling of Dianetic questions which are reading on Clears & OT’s.)

- E. If any of these read, do a L3RH and handle per the instructions. (On Clears and OT’s simply indicate the read. Don’t run any engrams or seek further to repair. See HCOB 30 Oct 78, C/S SERIES 53, USE OF.)

- F. Clean up any protest and invalidation and rehab. to F/N.

- G. Find out what it is. If yogi or mystic exercises or some such 2 way comm. easier similar it to the first time it was done. Find out what upset had occurred before that and if the TA is now down, do an L1C on that period of the PC’s life.

- H. If Word Clearing, do a Word Clearing Correction List, handle all reads. If study errors, 2 way comm. earlier similar to F/N, and add a Study Correction List to the PC’s program.

- I. False TA is wrong cans or other error. Use HCOB 12 Nov 71RA, 15 Feb 72R, 18 Feb 72R, 21 Jan 77RA, HCOB 23 Nov 73RB, 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 2 way comm. times he was worried about (item) earlier similar 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 2 way comm. earlier similar to F/N. Auditors who made them need cramming badly or retread. Rehab F/Ns that have been missed.

- K. Can't have or Hav. Find correct Havingness Process and remedy.
- L. 2 way comm. 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?" 2 way comm. to F/N. Return to the C/S. A qualified C/S who has fully checked out on the materials must adjudicate whether this state has been attained before the PC may attest to Dianetic Clear.
- N. 2 way comm. to find what. Note the BD item. If the BD item covered by one of these categories handle per instructions. If not just 2 way comm. to F/N and get further C/S instructions for handling if necessary.
- O. Get the PC to tell you about it briefly. If correct then indicate to F/N. Go earlier similar and indicate it, if no F/N on first handling. If there is false TA, handle per 1 above.
- P. Indicate and 2 way comm. to F/N.

Per HCOB 30 October 1978, 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.

L. RON HUBBARD
Founder

LRH:dr:jb

Re-formatted for legal size paper and ease of use for C/S's and auditors
when the assessment list is assessed to F/N on multiple passes of the list.
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