

Name: _____

Date: _____

Counselling Skills

X D B O D Y L A N G U A G E W V N
M P E O P L E P E R S O N I N P O
Y D R A P P O R T D R L Y K A A N
Q Z H G N G E N U I N E N E S S J
A Y P U H Y K U Y M X S F E F I U
D M E E W Y Q L X L M I A M U G D
L V S Y G T P G D K F P J O X Q G
L R L E D O B P K E M P A T H Y E
T H D C Z N D D Q S F I H I O J M
Q S I O F E U H D S R X O O Q O E
B L K N L L T B U C I V V N N O N
G B M T P T O V P T E X W X O W T
R Q W A C R C E M G N T V T I U A
I P I C F T M B V W D C D O E F L
H H O T Z C J P N L L Z B U F V X
J O C X J Q Z P M K Y L F B Y A G
B G A C T I V E L I S T E N I N G

Active Listening

Non Judgemental

People Person

Body Language

Eye Contact

Genuineness

Friendly

Emotion

Rapport

Empathy

Tone