Note: All personal information is held securely in accordance with the appropriate legislation, is confidential and treated appropriately.

Client Information			
Mr/Mrs/Miss/Ms/Other	Last	name	
Name you like to be called			
Address			
Telephone Numbers/Contact Details/Ok to cont			
Home		Work	
Cellphone		Pager	<u>Y/N</u>
Fax	<u> </u>		\/ /n
Duefermed Contest Made/s			
Preferred Contact Mode/s			
<b>Employment/Education Information</b>			
Highest Degree Achieved?	Years in Sc	:hool?	
Occupation			
Employer Name			
Personal Information			
Date of Birth	_ Ma	arital Status	
No. of Children Other Important Family	Members?		
Significant Other's Name			
Significant Others Date of Birth			
Significant Dates (e.g. Wedding anniversary)			
Name(s) and Age(s) of Child(ren) 1			
<b>Emergency Contact</b>			
Name:			
Phone #:			
Address:			
Relationship:			
Intake Questions:			
What do you most want to achieve for yourself in	n your life/	/career?	

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What would you say have been your 3 greatest accomplishments to date?  1
2
3
EXPECTATIONS: What do you expect to achieve in life as a result of hiring me as your life coach?
Your History: What is the hardest thing in your life that you have had to overcome?
What major transitions have you had in the past two years? (Example: Entering or approaching a different age, a new or different relationship, job role, residence, a change in children's ages/stages, etc.)
Have you worked with a coach before or a similar one-on-one adult relationship (e.g. tennis coach, piano teacher, and therapist)? If so, what worked well for you and what did not work in the relationship(s)?
If you have a mental health/psychiatric history, do you feel like the issues for which you sought treatment are under control? Please list any conditions which have been problematic for you, now or in the past:
Your Life Story / History: What would you like to share with me? What would help me know you better?

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# **Client Contact Information** (Use back or another sheet if more space needed) Improvements: Please list any improvements you would like to make in the following areas: Family: Money / Financial Situation: \_\_\_\_\_ Career / Business life: Service / Personal Character: Relationships: Friends: \_\_\_\_\_ Living Space / Home: Personal Growth / Learning: \_\_\_\_\_ Health / Self Care: Creativity: Play / Leisure time: \_\_\_\_\_ Other areas: Your Life: Who are the key people in your life and what do they provide for you?\_\_\_\_\_

Email: the power of each other @outlook.com

Phone: (970) 776-6043

Looking at the past six months of your life, do you like the direction your life is moving in? Explain.
Is your life one of your choosing? If not, which parts are being chosen for you?  What is a dream or goal you have given up on?
What do you think is NOT possible to achieve in your lifetime that you wish you could?
What part of yourself, if any, have you given up on?
On a scale of 1 to 10 with 10 high, rate the quality of your life today/10  If you reach the age of 95 and continue to live your life and order your time the way you are right now, what regrets do you think you will have? (Tip: complete the statement "I wish I had") Do not include things from the past—only things you will regret if you continue your exact present path.
Tolerations: List five things that you're personally tolerating or putting up with in your life at present. (Examples: information you can't find, clutter, rude friends, tight shoes, dented car, job dissatisfaction, dead plants, broken equipment, cranky people in your life etc.)  1
2
3.
4
5
What are your primary stressors? (What stresses you out?)

On a scale of 1 to 10, 10 high, rate the amount of stress in your life right now/10
Potential and Possibility:  Do you have a personal or professional vision? If so, what is it?
What would you like to contribute to the world?
What would you like to give to people?  ———————————————————————————————————
What is your definition of success?
What would be your personal or professional legacy, which you would like to give to others, when it's all been sa and done?
Other Background: What do you spend most of your leisure time doing?
How do you create fun in your life?
What, in your heart of hearts, is the dream you long to see come true?

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Supporting you:				
What supports you if you get behind on your goals?				
What types of approaches discourage you or take away motivation?				
Here are ways of coaching clients. Which ones appeal to you?				
Brainstorming strategies together				
Support, encouragement and validation				
Insight into who you are and your potential				
Painting a vision of what you can become or accomplish				
Exploring and removing blocks and obstacles to your success				
Accountability; checking up on goals				
Working through self-improvement programs together				
Suggesting or designing action steps				
Teaching/Practicing skills associated with success				
Comments/Anything else you'd like me to know or want to tell me?				

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