

## PERSONAL INFORMATION

LAST NAME \_\_\_\_\_

FIRST NAME \_\_\_\_\_

NAME YOU LIKE TO BE CALLED \_\_\_\_\_

### MAILING ADDRESS

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_

ZIP CODE \_\_\_\_\_ COUNTRY \_\_\_\_\_

### PHONE INFORMATION

HOME TELEPHONE (\_\_\_\_\_) \_\_\_\_\_

WORK TELEPHONE (\_\_\_\_\_) \_\_\_\_\_

MOBILE OR MESSAGE PHONE (\_\_\_\_\_) \_\_\_\_\_

FAX NUMBER (\_\_\_\_\_) \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

OCCUPATION/NATURE OF BUSINESS \_\_\_\_\_

EMPLOYER NAME (OR NAME OF YOUR BUSINESS) \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ MARITAL STATUS \_\_\_\_\_

SIGNIFICANT OTHERS NAME \_\_\_\_\_

NAME(S) OF CHILD(REN) AND THEIR AGE(S) \_\_\_\_\_

\_\_\_\_\_

**PLEASE WRITE A BRIEF DESCRIPTION OF:**

YOUR EDUCATION HISTORY: colleges attended, degrees, majors, etc., other trainings.

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YOUR WORK HISTORY: basics of the type of work/career areas you have experienced, and for how long.

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YOUR RELATIONSHIP HISTORY: chronicle your marriage(s), long-term relationships, etc.

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*Thank you very much! This information helps me be the very best coach for you!*

## **FOCUSING YOUR CHOICES**

An aspect of the coaching process is to assist you in clarifying your direction in your life style choices. This exercise will add clarity to the primary areas you want to focus on in coaching. Please describe the five areas you would like to change or improve in your ways of living. How will it look when you accomplish your goals?

### **1. What I would like to change or improve is.....**

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How will your health/ life change when this is improved?

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### **2. What I would like to change or improve is.....**

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How will your health/ life change when this is improved?

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### **3. What I would like to change or improve is.....**

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How will your health/ life change when this is improved?

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### **4. What I would like to change or improve is.....**

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How will your health/ life change when this is improved?

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### **5. What I would like to change or improve is.....**

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How will your health/ life change when this is improved?

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**10 THINGS YOU WANT ME TO KNOW ABOUT YOU**

1. \_\_\_\_\_  
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\_\_\_\_\_

2. \_\_\_\_\_  
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9. \_\_\_\_\_  
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10. \_\_\_\_\_  
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\_\_\_\_\_

## LAYING THE FOUNDATION FOR COACHING

As your coach, it's important for me to understand how you view the world in general, yourself, your family and your job or career. Each person comes from a unique place in their thinking and their interaction with the world around them.

Answering these questions clearly and thoughtfully, will serve both you and me. The questions may help you clarify perceptions about yourself and the direction of your life. These are "pondering" type questions, designed to stimulate your thinking in a way that will make our work together more productive. Take your time in answering them. If they are not complete by our first (foundation) session, bring what you have completed and finish the rest later. These answers will be treated with complete professional confidentiality.

Occupation/nature of business: \_\_\_\_\_  
\_\_\_\_\_

Employers or Business Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Do you have children? \_\_\_\_\_ Do your children live with you? \_\_\_\_\_

### Coaching

1. What do you want to get from the coaching relationship?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. What is the best way for me to coach you most effectively, what tips would you give to me about what would work best?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Do you have any apprehension or preconceived ideas of coaching?

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\_\_\_\_\_  
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## **JOB/CAREER**

1. What do you want from your job/career?

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2. What projects or tasks are you involved in currently or regularly?

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3. What are your key job/career goals currently?

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4. What skills or knowledge are you developing? How are you gaining this knowledge?

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5. How do your job/career goals support or fit with your personal goals or sense of purpose?

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6. In what ways does your job affect your level of stress and your health?

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## PERSONAL

1. What accomplishments or events must, in your opinion, occur during your lifetime to consider your life satisfying and well-lived?

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2. What is (or might be) a secret passion in your life? Something you may or may not have allowed yourself to do so far, but you would really love to do.

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3. What unique gift or knowledge do you have to contribute?

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4. What is your spiritual base or belief system? How do you draw upon your spiritual beliefs for support and to help you with moving forward with your life?

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5. Please describe what gives you a sense of purpose in life? What activities have meaning or heart for you?

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6. What's missing in your life, the presence of which would make your life more fulfilling?

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7. What do you do when you are really stressed, and feel up against the wall?

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8. What two steps could you take immediately that would make the greatest difference in your current situation?

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9. What else would you like your coach to know about you?

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### **HEALTH AND WELLNESS INFORMATION**

As your coach, my job is not to treat you, but to be your ally and your resource. When it comes to health and wellness issues, I will help you discover steps you may choose to take towards greater health and higher levels of wellness.

As your ally, I may refer you to medical, psychological, nutritional and other health-related services for more information and to seek treatment in these areas. I can be a source of support and accountability, helping you to follow through with any treatment plans that you devise with these other professionals.

1. Please describe your lifestyle and what you do to be healthy and well.

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2. Please describe any health challenges that you currently experience (including not only major concerns, but problems like headaches, insomnia, etc.)

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3. Are you currently on any medications? If so, what is the name of the medication and the intended impact of the medication?

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4. Please list any lifestyle changes/recommendations that have recently been made to you be a healthcare professional.

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5. What do you do to reduce stress in your life, or to counter-act the effect of stress in your life?

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6. Please describe a typical week in terms of diet and exercise.

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7. What do you do in your life that brings you happiness and joy? How often do you do this?

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8. What gets in the way of you doing what brings you joy and health in the world?

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9. Please list the behaviors you'd like to change and then rate your readiness to make changes on each of the identified behaviors you listed.

1 = Haven't even thought of changing this

2 = Have given it some thought

3 = Have started preparing to change (have looked up information, talked with others about it, etc.)

4 = Am already taking some action to change in this area

5 = Have already made the change and want help maintaining my progress

What behaviors related to your lifestyle do you want to change	Rate Readiness 1 - 5	Comments

10. How can a coach be of assistance in helping you make the lifestyle changes you'd like to make?

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11. What else would you like to add about your wellness goals?

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