CLIENT INTAKE FORM

Name						
Name you like to be called	?					
Address						
Phone (Home)		(Work)				
Phone (Mobile)		(Fax)				
E-mail address						
Occupation						
Employer's name						
Date of birth		Marital status				
Significant Other's Name						
Names and ages of childre	n					
Name	Age	Name	Age			
Name	Age	Name	Age			
Name	Age	Name	Age			
Name	Age	Name	Age			
Name	Age	Name	Age	_		
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COMMENTS ON EMBODIES A COACHING MINDSET

How satisfied are you with different areas of your life? Enter a number from 1 to 10 next to each of the following categories, 1, being completely dissatisfied and 10 being you are completely satisfied with this area of life. Assess how you feel today- not how hope to feel or how you felt last week.

1- Completely dissatisfied 10 - I could not be happier

3. What are your current strengths and opportunities?	2. Are you or have you ever been in counseling or therapy? Yes No
	If yes, please tell me what led you to therapy.
	3 What are your current strengths and opportunities?
4. What are the most important things (good or bad) happening in your life right now?	o. What are your current strengths and opportunities.
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5. Looking back 1 years from today, what has to happen for you to be completely satisfied with your progress over the last year?
6. What is preventing you from achieving this now? In the present?
7. How might you sabotage yourself as you work toward your goals?

8. How might you sabotage the coaching engagement?										
9. What,	if any, are	your que	stions ab	out coach	ning?					
10. Rate 1	the level o	of stress in	your life	on a scal	le of 1 to 1	IO. (1=low 7	and 10=h	nigh)	10	
11. What	are your p									

2. What attributes are looking for in a good coach?					
13. What is your best quality as a friend or in a friendship?					
14. How do you like to be supported or held accountable?					

15. What else would you like me to know about you?							