

NEW CLIENT INTAKE FORM

Name:			Date:
Address:			
Phone:			
Date of birth:	Sex:	Marital status:	
Occupation:		Education:	
How did you hear about ι	us?		

All information will be kept confidential. Please answer the following questions: (Mark your level of agreement with each of the below statements)

	Not at all	Somewhat	Very Much	Absolutely
I am optimistic.	1 2	3 4 5	6 7 8	9 10
I am satisfied with my life.	1 2	3 4 5	6 7 8	9 10
I am satisfied with my health.	1 2	3 4 5	6 7 8	9 10
I am satisfied with my financial situation.	1 2	3 4 5	6 7 8	9 10
I am satisfied with my social life.	1 2	3 4 5	6 7 8	9 10
I feel good about my personal relationships.	1 2	3 4 5	6 7 8	9 10

	Not at all	Somewhat	Very Much	Absolutely
I'd like coaching on a particular issue.	1 2	3 4 5	6 7 8	9 10
I'd like coaching on general direction.	1 2	3 4 5	6 7 8	9 10
I'd like coaching on various issues.	1 2	3 4 5	6 7 8	9 10
I'd like work related coaching.	1 2	3 4 5	6 7 8	9 10
I'm not clear what I need coaching on.	1 2	3 4 5	6 7 8	9 10

1.	Why are you seeking professional coaching at this time?				
2.	How do you believe professional coaching can help?				
3.	What are your three top priorities and what do you expect to gain from your coaching sessions?				
4.	How often would you like to meet, and how long do you anticipate meeting with a coach to reach your objectives?				