

COACHING ASSESSMENT

Full Name: _____

Age: _____ DOB: _____

Occupation / Career field: _____

Email Address: _____

Phone Number: (_____) _____

Please complete the following questions.

1. What is going on in your life that you are seeking services at this time? _____

2. How long have you been experiencing the above situation / circumstances? _____

3. Have you done anything prior to now to address or change your situation? If so, what? _____

4. If you could change ONE thing about your life, what would be the most important thing to change for you?

On a scale of 1-10, with 10 being the highest/best, answer the following questions.

1. How motivated are you to work to change your situation? _____

2. How ready and willing are you to dedicate the time needed to change your situation? _____

3. How ready and willing are you to invest in yourself and your goals, mentally? _____

4. How ready and willing are you to invest in yourself and your goals, emotionally? _____

5. How ready and willing are you to invest in yourself and your goals, financially? _____

6. How able are you to receive direction and implement suggestions? _____

How soon would you like to experience a change and reach your goal(s)? _____

What are you willing to do achieve the most important thing in your life right now? _____
