Grazia Miglietta

Functional Diagnostic Nutrition ® Practitioner

Holistic Health Practitioner

Functional Health Consultant and Coach

[info@w-holisticHealth.com](mailto:info@w-holisticHealth.com)

[www.W-holisticHealth.com](http://www.W-holisticHealth.com)

*Your Complimentary Ideal Health & Weight Discovery Session!*

During this Free 30-minute call, I will listen to you, understand your main complaints, and explain what you should do next to regain control of your health and become the CEO of your health!

Tell me a little about you and what I can help with. Fill out the form below, and you will receive a link to schedule your appointment.

*One conversation can change your life*.

**INITIAL CONFIDENTIAL QUESTIONNAIRE**

**Name and last name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age and sex:** \_\_\_\_\_\_\_\_

**E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Preferred Phone: \_\_\_\_\_\_\_\_\_\_\_\_**

**1. What is your main health complaint? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2. How often does it bother you?**

Every day: \_\_\_ Once per week: \_\_\_ Once per month: \_\_\_ Other: \_\_\_\_\_

**3. How long has it been going on for?** 1-6 Months: \_\_\_\_ 1-3 Years: \_\_\_\_ Over 3 Years: \_\_\_\_

**4. What have you tried so far that has not worked? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**5. What is your current diet like? Please be specific: list breakfast, lunch, dinner, and**

**snacks, as well as the times you eat: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**6. Are you taking any supplements or medications? Please list what you take and what it is**

**for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**7. What would you like your health to be in 3 months from now? \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**How about six months from now? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**8. What obstacles, challenges, and struggles do you face regarding diet/lifestyle? \_\_\_\_\_\_\_\_**

**9. What would you expect to achieve from working with**

**me if we were to work together \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**10. What are 3-5 things you LOVE about your life and are grateful for?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**11. On a scale of 1-10 (10 being particularly important), how important is it to you to**

**resolve this? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

The following free personality test is optional but recommended: [**https://www.colorcode.com//**](https://www.colorcode.com//) **Which color are You? \_\_\_\_\_\_\_\_\_\_\_\_\_**

**P.S.:** Once completed, please send this as an attachment to [info@W-holisticHealth.com](mailto:info@W-holisticHealth.com) Thank you.

**N.B.: Everything you share with me is strictly confidential, and I guarantee your privacy.**

**A Glimpse for Your Ideal Health & Weight Discovery Session:**

My brand statement is: *“Naturally empowering the body to unleash its healing power”.* I want my clients to have the empowerment and education for self-care to stay healthy for the rest of their lives.

I do not diagnose or treat any specific conditions or focus on symptoms but treat the body as a whole. All recommendations are voluntary in application.