Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DOB: \_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Significant other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/ # of Pets \_\_\_ # of Children \_\_\_ Male \_\_\_Female

Have you ever been hypnotized Y / N Have you ever seen anyone hypnotized Y / N

Do you believe hypnosis can help with your challenges Y / N Have you ever meditated Y / N

Do you feel comfortable being touched by someone you trust Y / N Are you open to new ideas Y / N

Are you able to concentrate on an idea or thought Y / N Do you have a vivid imagination Y / N

Are you able to sit or lie still for a period of time Y / N Are you basically a trusting person Y / N

Do you daydream or involve yourself in fantasy Y / N Are you a spiritual person Y / N

Are you able to get in touch with your emotions easily Y / N Are you able to follow directions Y / N

Is it possible for a person to be healed by the power of their mind Y / N Have you walked or talked in sleep Y / N

Can you imagine tasting a juicy sour lemon Y / N Can I use the word (**God Y/ N**) or (**Universe Y/ N**)

I am under the care of a counselor, or psychiatrist Y / N What is that medical diagnosis/ condition\_\_\_\_\_\_\_\_\_\_

I have been diagnosed a condition by a medical professional Y / N \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**What is your goal:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**How committed are you to attain this goal? 1-10** \_\_\_\_\_\_\_\_\_\_\_\_\_

**What do you want to change:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**When did you noticed it was an issue?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **AGE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**1.What's Standing In Your Way?**  If you can name it, you can claim it. For Example: Life and careers are full of roadblocks and naming the hurdles -- personal, professional or relational -- can help you begin to brainstorm what problem you really need to solve or help lessen the challenge.

**2. What Will Happen If You Don't Take This Step?**  I find this question helpful because it gets us where we need to be: the core of the challenge and the hesitation someone feels is to sit where we are (sometimes, literally and physically), and ask it again, and again until something comes to us?

**3. What Does Success Look Like?**  Start visualizing what you want and see, feel and hear and heal these things in your life. Somehow, when we get older, our daydreaming stops. This is a way to explore from a passion perspective and is starting to take action in creating the path you desire. Action is so key to goal-setting.

**4. What Are Your 'Five Whys?'** Asking about your five whys is so simple, yet so powerful, Once we go deeper, we get to the real reasons and the light bulb goes off. So dig deep and give me the 5 why’s!

**7. What Are You Most Proud Of?** Consider the moments you are most proud of. Positive contributions and accomplishments, reaffirming personal value. Recognizing unique worth and identifying the areas where you made a difference bolsters confidence, spurs positive action, and drives energy back into your work and/or goals.

**8. What Do You Want?**  What do you want to get out of our time and work together? I am here to help you create the map that gets you from here to the place you want to be.

**9. What Have You Done To Try To Solve The Problem?**  What *specifically* have you done so far? What worked and what didn’t?

**10. If you could do it differently, how would you do it?** What do you *have already* (eg. skills and resources) that could move you forwards?

**11. What Are You Doing To *Not* Achieve Your Goal?**  What are you purposefully doing to *not* achieve this goal that is so important to you? You are making choices every single day that will determine whether your hopes become realities.

**12. If Your Main Obstacle Didn't Exist, How Would Your Life Look?** Just imagine it not being there anymore. What would you do differently, how would you act differently? Who would be with you? Would you still live in the same house, have the same job? What would you do differently if nothing was in your way? If you (secretly) knew the answer to getting unstuck, what would that be?

**13. What Do You Need Most Right Now?** Prioritize what is most important and needs immediate attention.

**14. What Will Things Look Like After You've Been Successful?**  What would "this" look like after you have been successful? How will you feel? **If you were *at your best,* what would you do right now?** Name the steps of your success and what you did to get there. Imagination is key… it doesn’t matter that you haven’t achieved it already. What’s important is to imagine that you have already achieved that goal and how you resolved the issue…it’s ok to make something up!

**15. What Is The Most Important Thing, people, In The World To You, And Why?**

**16. What's Important About achieving your goal?**

**17. What is the worst thing that could possibly happen, if you don’t take action towards your goal, explain how it would affect you and the people around you?** There’s room to take action, even just a small step, to improve your situation. What would that feel and look like for the smallest change to take place?

18. **What would stop you from making this change?** Change meets resistance. All too often, this resistance is self-imposed. Responding to an “I can’t, won’t, or shouldn’t.

**19. Who will benefit from these changes you wish to make?**

**20. Name 5 action steps today that you can start implementing that will make significant changes now and over the next few months?**

**21. If you could NOT fail, if you could succeed, what would you do if you had no fear?**

**22. How would this change effect the rest of your life?** What will it do for you? 1 year from now, 5 years from now, 10 years from now?

**23. What do you say to yourself every day that’s negative about the situation and what could you say to yourself that’s positive about it? How can you live a more empowering life?**

**24. How do you normally sabotage yourself - and what will you *do differently* this time?**

**25. How will you keep me informed and how will *I know* you’ve completed your action’s?**

**26. Who else will you tell about your actions (to support you in completing them)?**

**27. What *specifically* will you ask your supporters to do for you?**

**28. Tell me how you’ll *feel* once you have completed your actions?**

**29. How will you *reward yourself* when you complete your actions?**

**30**. QUICK ACTION STEP TO SUCCESS…. Counting backwards from 100-1…

5 minutes a day bring your attention to your breathe. Rub your index finger and thumb together count backwards from 100-1 to remove a craving, or a phobia or habit. Visualize, seeing yourself successful, and saying your affirmations just before bed OR in the morning. Visualizing your success will lead you to more success. You may not want to do it now or later… the important thing is to just do it!