



*Fight it out, Figure it out,
Love it out!*

Life Coach/Strategy Intake Form

Please provide the following information. Information you provide is confidentiality just as Life Coaching or Mentoring.

Date: _____

Name: _____
(First) (Last) (Middle Initial)

Name of parent/guardian (if you are a minor):

(First) (Last) (Middle Initial)

Birth Date: ____/____/____ **Age:** _____ **Gender:** Male Female

Address: _____
(Street and Number) (City) (State) (Zip)

Home Phone: () _____ May we leave a message? Yes No

Cell/Other Phone: () _____ May we leave a message? Yes No **E-**

mail: _____ May we email you? Yes No

*Please be aware that email might not be confidential.

Marital Status:

Never Married Partnered Married Separated Divorced Widowed

If married, name of spouse: _____

Name of Children and ages: _____

Referred by: (check any that apply)

Internet Search

Family or Friend

Website

Social Media: _____

other: _____

Personal/ Professional Goals:

What are the biggest changes you want to make in your life in the next 3 months?

1. _____
2. _____
3. _____

What are the biggest changes you want to make in your life over the next 3 years?

1. _____
2. _____
3. _____

What do you most want to achieve for yourself in your life/career?

What are the restraining forces keeping you from achieve these?

What would you say have been your 3 greatest accomplishments to date?

1. _____
2. _____
3. _____

What do you expect to achieve in life as a result of hiring me as your life coach?

3

What is the hardest thing in your life that you have had to overcome?

What major transitions or life changes have you had in the past two years?
(Example: Entering or approaching a different age, a new or different relationship,
job role, residence, a change in children's ages/stages, etc.)

Who are or have been your major role models? Why?

Have you worked with a coach before or a similar one-on-one adult relationship (e.g.
tennis coach, piano teacher, and therapist)?
If so, what worked well for you and what did not work in the relationship(s)?

Who will be supporting you through this process?

On a scale of 1 to 10 with 10 high, rate the quality of your life today. _____

List five things that you're personally tolerating or putting up with in your life at present. (Examples: information you can't find, clutter, rude friends, tight shoes, dented car, job dissatisfaction, dead plants, broken equipment, cranky people in your life etc.)

1. _____

2. _____

3. _____

4. _____

5. _____

In a typical week, what do you spend a great amount of time doing?

What are your primary stressors? (What stresses you out?)

On a scale of 1 to 10, 10 high, rate the amount of stress in your life right now. _____

Life Changes

Please list any changes you would like to make in the following areas:

Family:

Money / Financial Situation:

Career / Business life: _____

Service / Personal Character: _____

Relationships: _____

Friends: _____

Living Space / Home: _____

Personal Growth / Learning: _____

Health / Self Care: _____

Creativity: _____

Play / Leisure time: _____

Leisure:

Hobbies: _____

What do you spend most of your leisure time doing? _____

Life Strategy Agreement



Date: _____

Name: _____

Our sessions are conducted over then phone and virtual (Zoom, phone, FB messenger, etc.).

The cell number is (585)472-1291

Missing or rescheduling sessions is strongly discouraged. If an unforeseen event does require you to reschedule, I must be notified 24 hours prior to the scheduled session. Please remember that not completing, or partially completing your assignments is not a reason to reschedule. If assignments are not complete, it is very important that we work together during your scheduled session to strategize, overcome obstacles, and establish next steps.

If notification is not given 24 hours prior to the scheduled session time, the session will be considered missed and thereby forfeited.

Life Coaching Disclaimer of Liability: Client hereby employs as Life Coach for the purpose of supporting the Client with respect to Client's self-awareness, vision and goals, and strategic plans, has experience in such matters and agrees to render such coaching services..

I have read and agreed to the Policies and Disclaimer of Liability.

Client's Signature (Date) _____

Life Coach's Signature (Date) _____

Once you have completed this form please email it to me at victory@nikkifluitt.com or bring it to the initial session. Any questions be sure to contact me.