



PARENT COACHING

Service Inquiry Form



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CONFIDENTIAL INQUIRY

This form helps determine whether Parent Coaching may be appropriate for you and your family.

Completion does not establish a professional relationship or guarantee acceptance into services.

Estimated completion time: 10-15 minutes.



Parent Coaching Service Inquiry

Contact and family information

1. Before You Begin

Parent Coaching is a voluntary, educational, and supportive service focused on parenting skills, communication, confidence, and child-focused decision-making. It is not emergency service, legal advice, or a replacement for therapy when therapy is needed.

2. Contact Information

Full name *

Preferred name

Date of birth

Telephone *

Email *

Address

Preferred contact method:

☐

Email

☐

Telephone

☐

Text - scheduling only

Safe to leave voicemail?

☐

Yes

☐

No

Safe to send email?

☐

Yes

☐

No

3. Family Information

Relationship status:

☐

Married

☐

Separated

☐

Divorced

☐

Other

Approximate separation date

Number of children

Children - names, ages, and current living arrangements



4. Referral Information

How did you hear about STCC?

- | | |
|--|--|
| ☐ Website | ☐ Lawyer |
| ☐ Physician | ☐ Therapist |
| ☐ Friend / family | ☐ Previous client |
| ☐ Online search | ☐ Self-referral |
| ☐ Other | |

Referring person or organization

5. What Brings You to Parent Coaching?

- | | |
|--|--|
| ☐ Improve communication | ☐ Co-parenting after separation |
| ☐ Parenting transitions | ☐ Parenting plan support |
| ☐ Managing conflict | ☐ Child behaviour |
| ☐ Parenting strategies | ☐ Blended-family concerns |
| ☐ New partner adjustment | ☐ Boundary setting |
| ☐ Emotional regulation | ☐ Stress management |
| ☐ Parenting confidence | ☐ Preparing for mediation |
| ☐ Preparing for Parent Coordination | ☐ Other |

Briefly describe your current concerns *



Parent Coaching Service Inquiry

Current parenting situation and goals

6. Current Parenting Situation

Describe the current parenting arrangement and schedule, if applicable:

Describe current communication with the other parent or important caregivers:

7. Parenting Challenges

Communication with the other parent:

☐ Good ☐ Fair ☐ Poor ☐ N/A

Current conflict level:

☐ Low ☐ Moderate ☐ High ☐ N/A

Child transitions between homes:

☐ Smooth ☐ Sometimes difficult ☐ Frequently difficult

Consistency between homes:

☐ Consistent ☐ Some differences ☐ Significant differences

8. Goals for Coaching

What would you like to accomplish through Parent Coaching? *

What would meaningful progress look like for you and your family?

9. Current Supports

- | | |
|---|---|
| ☐ Therapist / counsellor | ☐ Family physician |
| ☐ Psychiatrist | ☐ Lawyer |
| ☐ Mediator | ☐ Parent Coordinator |
| ☐ Child therapist | ☐ School supports |
| ☐ None | ☐ Other |

List relevant professionals, programs, or supports currently involved:

10. Children's Needs

- | | |
|---|---|
| ☐ Anxiety | ☐ Behaviour concerns |
| ☐ ADHD | ☐ Autism / neurodivergence |
| ☐ School / learning concerns | ☐ Medical concerns |
| ☐ Mental health concerns | ☐ Developmental concerns |
| ☐ None identified | ☐ Other |

Please explain relevant child strengths, needs, diagnoses, supports, or accommodations:



11. Preliminary Safety Screening

Complete this section privately.

A yes response helps identify whether safeguards or another service may be needed.

- | | | |
|---|---------------------------|--------------------------|
| Is there current or past family violence or coercive control? | ☐ Yes | ☐ No |
| Is there a protection, peace bond, or no-contact order? | ☐ Yes | ☐ No |
| Is Child and Family Services currently involved? | ☐ Yes | ☐ No |
| Are there safety concerns during exchanges or parenting time? | ☐ Yes | ☐ No |
| Are there substance use concerns affecting parenting? | ☐ Yes | ☐ No |
| Are there current criminal charges involving either parent? | ☐ Yes | ☐ No |
| Do you feel safe participating in coaching? | ☐ Yes | ☐ No |

Explain any yes responses and current safety measures:



Parent Coaching Service Inquiry

Readiness and session preferences

12. Readiness for Coaching

Please indicate your understanding and readiness. These statements help determine whether coaching is likely to be a helpful fit.

- ☐ I understand Parent Coaching is voluntary.
- ☐ I understand Parent Coaching is educational and supportive.
- ☐ I understand Parent Coaching does not provide legal advice.
- ☐ I understand Parent Coaching does not replace counselling or therapy.
- ☐ I understand coaching focuses on parenting skills, communication, and child-focused decision-making.
- ☐ I am willing to participate respectfully and actively.
- ☐ I am willing to consider activities or practice between sessions.

13. Session Preferences

Preferred format:

- ☐ In person ☐ Virtual ☐ Either

Interested in:

- ☐ Individual coaching ☐ Two-parent coaching ☐ Either

Preferred time:

- ☐ Morning ☐ Afternoon ☐ Evening

General availability and scheduling limitations:

Is there anything else you would like STCC to know?



14. Acknowledgement

Please confirm each statement before signing. This is an inquiry only and is not a full intake or informed consent agreement.

- ☐ I understand this is an inquiry form only.
- ☐ I understand completion does not establish a professional relationship.
- ☐ I understand completion does not guarantee acceptance into Parent Coaching.
- ☐ I understand the information will be reviewed to determine whether coaching may be appropriate.
- ☐ I understand additional intake and informed consent documents will be required before coaching begins.
- ☐ I confirm the information provided is accurate to the best of my knowledge.
- ☐ I understand electronic transmission carries privacy and security risks that cannot be completely eliminated.

Electronic signature / typed name *

Date *

Submission instructions

Save the completed PDF and submit it using the secure method provided on the STCC website.

Do not send urgent or emergency information through email or a website form.

For questions: (204) 818-2609 | sandi@stcc.ca

For STCC Office Use Only

Date received

Reviewer

Preliminary outcome:

- ☐ Offer consultation ☐ Request more information ☐ Refer elsewhere

Review notes and recommended next steps: