

Discovery Form

Please fill in this form with as much detail as you feel comfortable sharing; this enables your coach to come into the Discovery Session knowing as much about you and your goals as possible, so your partnership can begin on the right foot.

Personal Information

Name:

Age:

Email:

Phone #:

Main Health Goals

Why are you reaching out to a Health Coach today? What specific health, wellness, and lifestyle changes would you like to make? On a scale of 1-10, how important is to you to make each of these desired changes?

Desired Health Changes	Importance (1-10) 1 = not very important 10 = non-negotiable

How would your life be different if you were to achieve these health changes?

What have been your barriers in creating these health changes for yourself?

How do you feel a Health Coach will help you achieve your goals?

Coachability Self-Assessment

On a scale of 1-10, rate how ready you are to enter a health coaching relationship right now.

1 = I am not ready

5 = I think I'm ready

10 = I am 100% ready and excited!

	Rating 1-10
I am open-minded about learning new ways of eating, moving, and living.	
I can commit to changes that feel uncomfortable, unusual, or unconventional.	
I will communicate and negotiate with my health coach as an equal partnership, and feel confident to ask for what I need.	
I have a high level of self-awareness.	
I will keep my word to my coach and to myself.	
I understand that health coaching is an investment in myself, and I will not suffer about the financial cost.	