Coaching Intake Form <u>Stacy Cahalan</u>

| Name: _ | | |
|---------------|--|--|
| Birth date | | |
| Phone number | | |
| Email address | | |
| VISION - | + GOALS | |
| (| magine yourself 12 months from now — what's different, better, or more aligned in your life? Think about work, relationships, mindset, confidence, clarity, creativity — whatever matters to you.) | |
| | What are 2–3 goals you'd love to work on through coaching? (They can be personal, professional, or even spiritual — big or small.) | |
| • \ | What does success look or feel like for you in this season of life? | |
| • \ | What gets in your way? What are some patterns, habits, or inner doubts you've noticed? | |
| | OTHS + VALUES What do you naturally do well? What do friends or coworkers say you're good at? | |
| | What activities or environments light you up? (Think: times when you lose track of time, feel fully present, or most yourself.) | |

| • | What values matter most to you? ☐ Integrity ☐ Creativity ☐ Connection ☐ Adventure ☐ Faith ☐ Freedom ☐ Growth ☐ Stability ☐ Fun ☐ Service ☐ Family ☐ Achievement ☐ Other: |
|-------|--|
| • | When do you feel most energized or alive? |
| SELF- | REFLECTION |
| • | If your life had a "theme" right now, what would it be? (A title, word, metaphor, or song lyric?) |
| • | What do you want more of in your life? What do you want less of? |
| • | What's one thing you're proud of, and one thing you're still working on? |
| COAC | HING RELATIONSHIP Have you worked with a coach, mentor, or counselor before? What was helpful (or not)? |
| • | What kind of support helps you grow best? □ Encouragement □ Accountability □ Gentle reflection □ Direct feedback □ Creative brainstorming □ Space to talk it out □ Other: |

• What's something you want me to know about you as we start working together?