



### Coaching Client Information

Client name:	
Name you prefer to be called:	
Mailing address, street:	
Mailing address, city/state/zip:	
Home phone:	
Office phone:	
Mobile phone:	
Phone you prefer to use (X): <input type="checkbox"/> Home <input type="checkbox"/> Office <input type="checkbox"/> Mobile	
Email address:	
DOB:	
Relationship status:	
Name of spouse/S.O.:	
Children names and ages:	
<u>Employment</u>	
Employer:	Years:
Title:	
<u>Education</u>	
School:	Degree & Date:
School:	Degree & Date:
Describe any previous coaching or counseling experience:	

**PO Box 391282  
Solon, OH 44139-8282  
440.248.9814**

Please provide a brief life history with any information that would be helpful to coaching:

Please provide a brief work history with any information that would be helpful to coaching:

Please describe your goals for this coaching relationship:

Please describe your personal and career goals for one year and for five years:

Is there anything else that I should know as we begin this coaching relationship?

Client Signature: \_\_\_\_\_ Date: \_\_\_\_\_