

## Coaching Program Application Form

Today's Date: \_\_\_\_\_

### General Information:

Your Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Male Female Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Relationship Status: \_\_\_\_\_ Number of Children \_\_\_\_\_ Ages of Children \_\_\_\_\_

Education: High School Some college BA/BS MA/MS Ph.D. Other \_\_\_\_\_

Field of Study: \_\_\_\_\_ Additional Background: \_\_\_\_\_

Company Name: \_\_\_\_\_ Occupation/Title: \_\_\_\_\_

Preferred Phone #: Cell Home Work Best Dates/Times to Reach You: \_\_\_\_\_

How did you hear about ARS Professional Development \_\_\_\_\_

### Your Goals:

What three goals would you like to accomplish within the next three months?

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

What one major goal would you like to accomplish within the next twelve months?

What has been your greatest challenge?

What do you expect to achieve from coaching?

### On a scale of 1 to 10 (10 as high), rate the following:

Your life \_\_\_\_\_ your health \_\_\_\_\_ the amount of stress \_\_\_\_\_

### Here are ways of coaching clients. Which ones appeal to you?

<input type="checkbox"/> Brainstorming strategies together	<input type="checkbox"/> Support, encouragement and validation
<input type="checkbox"/> Insight into who you are and your potential	<input type="checkbox"/> Painting a vision of what you can accomplish
<input type="checkbox"/> Exploring/removing blocks to your success	<input type="checkbox"/> Accountability; checking up on goals
<input type="checkbox"/> Working through self-improvement programs together	<input type="checkbox"/> Suggesting or designing action steps

Any additional questions or comments:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_