



Health History Assessment Form:

Name-

Age-

M/F

Email-

Phone-

Job/Career-

How Long-

Weight-

How Long-

1. How would you describe your Health journey up to this point?

2. Are you interested in short term or long term goals?

3. List 1 main Goals you would like to accomplish and two supporting goals?!

(What is your main Goal?)

(What would help me get there?)

(What would help me get there?)

**4. What do you hope for in a coaching relationship?
(you have hired me, what do you expect or needs from me to accomplish your goals?)**

List 3 goals...

Body Goal-

Mind Goal-

Spiritual Goal-

5. What is motivating you to be healthy right now?

6. Does this motivation differ from what you have felt in the past? How so? How has failed attempts at health affected you?

7. What is 1 activity you would like to do in a few months that you can't right now?

8. What do you feel good about? In your mind, body and spirit?

9. How much are you willing to work for your health goals?

10. What do you do when things get tough? How do you de stress? Is it healthy? What happens when you get discouraged?