

***KATHI CASEY, HOLISTIC HEALTH COACH***



**Kathi Casey, ERYT, CPI, Reiki Master**  
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**Personalized Coaching Program Assessment**

**First some personal health information:**

**Full Name:**

**Address:**

**Telephone:**

**Emergency Contact:**

**Date of Birth:**

**Weight:**

**Height:**

**Medication taken (include over the counter and vitamin supplements, please):**

**Date of Last Physical Check-Up:**

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**Physical Results – i.e.: High Blood Pressure, Cholesterol, bone loss, etc.**

**Any chronic conditions, pain, or illnesses:**

**Do you have any physical complaints? (i.e.: achy joints, stiff muscles, headaches, etc.)**

**Now let's get down to *YOUR* personal wellness goals!**

**What does your ideal vision of yourself look like?** (Weight, well-being, chronological age vs. how old you feel)

**\*\*Take some time to think through what *you believe* you should *look and feel* like at this point in your life.**

\*A goal or dream can be a little overwhelming. Sometimes you're not sure where to start, and so you simply don't. In order to take action toward your goals, we'll first work to identify what they are, then break them down so you can see the small steps to take that will lead to your success. Once you've completed one or two steps and started to create success toward your goals, your momentum and excitement will build. In addition, making consistent effort toward your goal is what will get you there. As my coach and mentor, Jack Canfield says "Great things are created one step at a time." 😊

**Have you or do keep a food/exercise log? (We call this a Sexy Body Log)**

If yes, please include a copy of 7 days intake/workout with this assessment, if you have not done one, please pick up a small notebook and keep track of everything you ingest all day for the next 7 days and every activity that you do, including going up and downstairs to do laundry, change clothes etc. Include walking the dog – even if it's only around the back yard. This also means everything you eat at meals, between meals, everything to drink including water, alcohol, tea and coffee. Every bit of everything. This is an important tool that we'll use for making small and large adjustments, so please be honest with yourself.

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**Do you have a work-out routine? Please describe it with as much detail as possible, for instance:** Once a week Yoga class; walk 3 miles with friends every Thursday; I'm a couch potato and need a program I can begin from my couch. (Yes, this is possible)

**Have you tried any specific diet plans like Atkins, Weight Watchers, Paleo etc. and if so, what was the result? Name 3 things you liked about the plan and 3 you hated please.**

**Have you ever written out a specific plan to achieve your wellness goals? A One Year, Two Year, 5 Year plan? When the kids grew up? When you retire? If so, what do these goals look like? If not, perhaps you've at least thought about some? Jot down a few of the things that plan included, or would have included.**

**Take the time now to write at least 3 personal wellness goals that you would like to begin now, and accomplish within the next 6 months.**

**\*\*Prioritize these goals - # 1 being the most important, 2 the next and so on.**

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**How confident do you feel in being able to accomplish your wellness goals?**

**How comfortable are you in using affirmations and visualization for help in achieving your goals?**

**Would you or, have you tried other complimentary therapies like EFT (Emotional Freedom Tapping), or meditation?**

**What are the undesirable results that you are experiencing as far as your wellness goals right now? (knee pain, not being able to keep up with the grandkids, not fitting into clothes, gaining more weight, etc.)**

**What is difficult or troubling about this area of your life? (can't seem to lose the weight, every time you set up a work-out schedule, something comes up...)  
Think about and include any stressors that may be affecting your results, like retirement is difficult to get used to, loss of a family member, taking care of elderly parents, etc.**

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Think back on the answers to the above questions – What do you think is the *biggest thing* holding you back from your fitness/wellness goals and how can you “release the brakes”? What have you thought about as something you can do that would bring a more desirable outcome? Have you tried something, or have you been “stuck?”

If there is there anything in particular that you would like to ask me or know about in the area of your personal wellness, please ask here:

I acknowledge, to the best of my ability, that I am in good health and have no undisclosed medical problems that would restrict my ability to participate in this health/wellness program. I agree to notify Kathi Casey, Holistic Health Coach of any future health changes.

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