**SELF-COACHING ASSESSMENT**

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| **Name:**  | **Date:**  |

***To complete: Give a score of between 0 and 10 for each item***

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| **Life Area** | **Your Current Level of Satisfaction with each Life Area****(10 = Very Satisfied)** | **Importance to you of the Life Area****(10 = Very Important)** |
| 1. Job or other Daily Occupation |  |  |
| 2. Finances |  |  |
| 3. Family Relationships (Other than partner) |  |  |
| 4. Relationships with Friends |  |  |
| 5. Use of Leisure Time |  |  |
| 6. Relationship with Partner |  |  |
| 7. General Physical Health |  |  |
| 8. Level of Physical Fitness & Exercise |  |  |
| 9. Feeling Relaxed and in Good Mental Health |  |  |
| 10. Feeling in Control of Your Life |  |  |

**Summary of Issues:**

Have a look at the above scores and then write out in your own words an outline of the issues you want to improve through self coaching, indicating how they have become a problem and what you would like to change. If necessary, continue on a further sheet.