

Yoga & Health Coaching Inventory

Name _____ Phone _____ Date _____

Address _____

Email _____

DOB _____ Age _____ Height & Weight _____

Please fill out the areas below to the best of your ability. More detail is better than less. Your answers will guide our sessions, making the most efficient use of our time together, and maximizing the possible benefits to you! ***For each area:***

<i>On a scale of 1 (poor) – 10 (outstanding), how would you rate this area of your life?</i>	<i>Successes or changes needed.</i>
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Mindfulness:

Awareness of the present moment; paying attention to what you are doing while you are doing it.

1 2 3 4 5 6 7 8 9 10	Successes, questions, changes, etc.
What do you do?	

Physical Activity & Rest:

Activities of daily living like cleaning and gardening, also stretching, dancing, walking, yoga, running, cycling, etc. Adequate sleep and relaxation. Time spent unplugged. How does your body & mind feel?

1 2 3 4 5 6 7 8 9 10	Successes, questions, changes, etc.
What do you do?	

Nutrition:

Eating a balanced, healthy diet. (Plenty of fresh vegetables and fruits in good variety, lean protein, whole grains, healthy fats, nuts/seeds, lots of water. Avoiding sodas & processed sugars--high fructose corn syrup, artificial sweeteners. Also alcohol consumption.)

1 2 3 4 5 6 7 8 9 10	Successes, questions, changes, etc.
What do you do?	

Physical Environments:

Spaces where you live/work/study (fresh air, light, noise, toxins, color), as well as landscapes surrounding those spaces. How does it feel?

1 2 3 4 5 6 7 8 9 10	Successes, questions, changes, etc.
What do you do?	

Relationships & Communication:

Meaningful time with partner, family, friends, and/or co-workers (or fellow students) who are supportive and nurturing. Ease of communication.

1 2 3 4 5 6 7 8 9 10	Successes, questions, changes, etc.
What do you do?	

Spirituality:

Seeing & feeling purpose and meaning in something larger than yourself; may include religious affiliation or other areas such as nature or the arts.

1 2 3 4 5 6 7 8 9 10	Successes, questions, changes, etc.
What do you do?	

Personal, Professional & Student Development:

Growing and developing one's own abilities, talents and interests, both in "being" and "doing"; living in balance.

1 2 3 4 5 6 7 8 9 10	Successes, questions, changes, etc.
What do you do?	

Mind-Body Connection:

Paying attention to the interconnectedness of life & the mind and body, as well as the effects they have on each other. Using techniques such as breathing practices, meditation, progressive muscle relaxation or guided imagery to activate the body's relaxation and healing response.

1 2 3 4 5 6 7 8 9 10	Successes, questions, changes, etc.
What do you do?	

Professional Care: Prevention and Intervention; Conventional & Complementary

Approaches: Routine screenings such as mammograms, prostate checks, colonoscopies, dental exams. Following treatments recommended by your conventional & complementary medical care/mental health providers.

1 2 3 4 5 6 7 8 9 10	Successes, questions, changes, etc.
What do you do?	

Additional Thoughts/Questions: (Nicotine, caffeine, other stimulants/depressants, other ideas.)

To complete at initial session:

Identified Goals:

1)

2)

3)

4)

Highlights:

1)

2)

3)

4)

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