

# Executive Function Coaching

## New Client Intake Form

*Instructions: Please complete this form to the best of your ability. Don't worry about perfect grammar. Bullet points are welcome. This form is designed to help us understand your unique brain wiring.*

### 1. Client Profile

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**Full Name:**

**Preferred Name/Pronouns:**

**Date of Birth:** .....

**Date of Intake:** .....

**Occupation/Grade:** .....

**Primary Motivation:**

*Why are you seeking coaching right now? What is the "spark" that made you reach out?*

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### 2. The "Current Landscape"

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**The Biggest Pain Point:**

*If you could magically fix one habit, routine, or stressful area this week, what would it be?*

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**Current Tools & Systems:**

*What are you currently using? (e.g., Google Calendar, paper planner, alarms, sticky notes, "piles")*

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**Success & Struggle History:**

*What has worked for you in the past? What strategies have failed or been abandoned?*

### **3. Executive Function Snapshot**

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*Circle the number that best represents your struggle level (1 = No Struggle, 5 = Constant Struggle):*

<b>Skill Area</b>	<b>Description</b>	<b>Rating (1-5)</b>
<b>Task Initiation</b>	Starting a task, especially if boring or complex.	1 2 3 4 5
<b>Planning</b>	Mapping out steps and deciding what to do first.	1 2 3 4 5
<b>Organization</b>	Tracking physical items (keys) or digital files.	1 2 3 4 5
<b>Time Blindness</b>	Estimating how long things take; arriving on time.	1 2 3 4 5
<b>Emotional Reg.</b>	Managing frustration, boredom, or rejection sensitivity.	1 2 3 4 5
<b>Flexibility</b>	Switching gears when plans change unexpectedly.	1 2 3 4 5
<b>Working Memory</b>	Holding multiple pieces of info in your head at once.	1 2 3 4 5
<b>Focus/Inhibition</b>	Resisting distractions (phone, noise) to stay on task.	1 2 3 4 5
<b>Metacognition</b>	Standing back to evaluate how you are doing.	1 2 3 4 5

### **4. Health, Environment & Sensory Needs**

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**Sleep Patterns (Do you struggle to fall asleep, wake up, or stay asleep?):**

**Sensory Preferences & Focus Environment:**

*Do you need absolute silence or background noise? Are you sensitive to bright lights or clutter?*

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**Energy Peaks (When is your brain most "online"? e.g., 6 AM, 11 PM):**

### **5. Coaching Preferences**

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**Accountability Style (Check all that apply):**

- Gentle Nudge (Reminders)    Firm Check-in (Deadlines)    Body Doubling (Co-working)  
 Visual Charts/Trackers                       Verbal Processing                       Gamification

**Success Metric:**

*In 3 months, how will your daily life look different if coaching is successful?*

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### **6. Strengths & Interests (The Good Stuff)**

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**Hyperfocus / Interests:**

*What are 3 things you can do for hours without getting bored?*

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**Core Strengths:**

*What do you like about the way your brain works? (e.g., creativity, crisis management, empathy)*

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*Please return this form 24 hours before our first session.*