## Client Information Form – Adults

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| Name  |  |
| Home address |  |
| Date of Birth and age - (to save me doing the maths) |  |
| Mobile Number |  |
| Landline |  |
| Skype name  |  |
| LinkedIn |  |
| **Family** |
| Are you married/ living with your partner/ single? |  |
| Partners principal occupation (if applicable) |  |
| If you have children, please list their names and ages |  |
| **Education** |
| Education Details – or attach CV  |  |
| Why did you choose your place of study? |  |
| Why did you choose your subject at University/College? |  |
| What was your dream job when younger? |  |
| **Employment - please also attach your CV** |
| Current job |  |
| **How satisfied are you with your current/most recent career?** *(On a scale of 1 to 10, with 1 being Least Satisfied and 10 being Most Satisfied)* |  |
| What do you **like most** like about your current/most recent job? |  |
| What do you **like least** like about your current/most recent job? |  |
| What would you most **like to change** about your current situation? |  |
| Are you having any difficulty in your current job? If so, please briefly describe those difficulties. |  |
| **Personal**  |
| Hobbies and interests and/or any voluntary work?*Please make a note of what you do in your non-work life. You may also like to include details of previous hobbies/interests that you no longer pursue, and why.*  |  |
| What are you most proud of (3 things – personal or professional)? |  |
| **What are your strengths?**What do you like most about yourself or what do you feel are your greatest personal assets? |  |
| What do you like least about yourself or what do you feel are your greatest personal challenges? What are your weaker areas? |  |
| **Goals and Desired Outcomes** |
| In your wider life do you have any goals or accomplishments you want to achieve in the short, medium and long term? *This can include wider life goals that my impact on career decision making.* |  |
| What sort of help are you seeking? What do you want to achieve? |  |
| **Do you have any career goals?** *Even if you are very uncertain, just fill in any thoughts that you might have.* |  |
| **Magic wand:** *if you could do anything you wanted, what would you do?* |  |
| **More** |
| Do you have any concerns/ challenges that need to be considered? |  |
| What has been the biggest thing you’ve had to overcome and how did you do that? |  |
| **Anything that could get in the way of success? (internal thoughts or external challenges)** |  |
| What career guidance have you previously received? |  |
| Have you taken any psychometric tests in the last 3 years*?*  |  |
| Anything else you want to share? |  |
| How did you hear about Amazing People |  |

***Please note – all our work is confidential***

***Please return to*** denise@amazingpeople.co.uk