

INFORMATION SHEET ON WHAT COACHING IS AND WHAT IT IS NOT.

COACHING IS A PROCESS NOT AN EVENT

- THE COACH'S ROLE IS TO ENABLE CLIENTS TO SET THEIR OWN AGENDAS AND HELP THEM FIND THE PATHS THAT ARE RIGHT FOR THEM.
- THE COACH'S ROLE IS TO HONOUR EACH INDIVIDUAL WHILE PROVIDING AN ENRICHING MODEL OF ADULT DEVELOPMENT.
- COACHING CAN DEAL WITH ALL AREAS OF A CLIENT'S LIFE AND CAN INCLUDE WORK, FINANCES, HEALTH, RELATIONSHIPS, BUSINESS, LEISURE, RETIREMENT, MARRIAGE, PARTNERSHIPS, EDUCATION, RECREATION, ETC.
- THE CLIENT DRIVES THE PROCESS AND MUST FEEL COMFORTABLE DISCUSSING TOPICS, ITEMS, AND PERSONAL DATA. AT ANY TIME THAT THE CLIENT FEELS UNCOMFORTABLE, THE CLIENT HAS THE RIGHT TO STOP THE DISCUSSION. IMPLEMENTING DECISIONS IS TOTALLY IN THE CLIENT'S HANDS.
- COACHING CAN BRING UP EMOTIONS AND THIS IS EXPECTED BUT AT ALL TIMES EMOTIONS EXPRESSED ARE AT THE CLIENT'S COMFORT LEVEL. IT IS HOPED THAT THE CLIENT WILL STAY IN THE MOMENT AND ADDRESS ISSUES AROUND THESE EMOTIONS BUT THEY ARE NEVER FORCED TO DO SO. THIS IS DISRESPECTFUL. A WILLINGNESS TO EXPLORE COULD ASSIST THE CLIENT, HOWEVER, BY INCREASING AWARENESS AND CURIOSITY IN ORDER FOR THE CLIENT TO MAKE MORE CONSCIOUS CHOICES AND MOVE IN THEIR DESIRED DIRECTION.
- COACHING IS NOT THERAPY WHICH DEALS WITH PSYCHOLOGICAL ISSUES, MENTAL HEALTH CARE, OR SUBSTANCE ABUSE – THAT IS THE FIELD OF THERAPY.
- CONFIDENTIALITY IS HONoured AT ALL TIMES AS A SACRED BOND BETWEEN COACH AND CLIENT.
- A COACH WILL STRIVE NEVER TO COACH FROM THEIR PERSONALITY PREFERENCES BUT WILL STRIVE TO APPRECIATE THE PERSONALITY DIFFERENCES OF EACH CLIENT.
- A COACH WILL USE VARIOUS TOOLS, ASSESSMENTS, AND ASSIGNMENTS TO ASSIST THEIR CLIENT IN ACHIEVING THEIR GOALS AND TO BENCHMARK WHERE THEY ARE, WHERE THEY WANT TO GO, AND ASSIST THEM ALONG THE WAY. THIS PROCESS WILL PROMOTE CHANGES IN SOME ASPECT OF THE CLIENT'S LIFE THAT WOULD MAKE THEIR LIVES BETTER, HAPPIER, MORE PRODUCTIVE, MORE BALANCED AND HARMONIOUS WITH THEIR TRUE NATURES.
- GOAL SETTING IS FUNDAMENTAL TO ACHIEVING RESULTS AND MUCH ATTENTION WILL BE PLACED ON FOCUSING ON SPECIFIC OUTCOMES. GOALS WILL BE ANCHORED TO A CLIENT'S DREAMS, VISION, AND STRENGTHS.
- AT ALL TIMES, THE COACHING/CLIENT RELATIONSHIP WILL BE RESPECTFUL, ETHICAL, AND MINDFUL OF HONOURING BOTH THE CLIENT'S BOUNDARIES AND THE COACHES BOUNDARIES.

I HAVE READ AND AGREE WITH THESE ITEMS. DATED: _____

COACH _____ CLIENT _____

PRE-COACHING FIRST SET OF QUESTIONS TO BEGIN THE PROCESS

CLIENT'S NAME: _____

DATE OF CONTACT: ____/____/____ **TELEPHONE#** _____

EMAIL: _____ **CELL#** _____

1. What goal(s) are you working on right now?

2. Where are you in relation to this/these goal(s)?

3. What do you think is keeping you from reaching this/these goal(s)?

4. How will you know you reached that/these goal(s)?

COACHING AGREEMENT

(During the course, you will partner with one other coach and will fill this out at that time.)

This agreement between _____ COACH
(post-training coaching agreement with one other participant in the group.)

and _____ COACHEE

will begin on _____ DATE

and will continue for a minimum of _____ (month, sessions, workshops, weeks, other).

We recommend that you commit to the 8 months of coaching after our in-class training to get the most out of this coaching process and to enhance your own coaching experience for working with your clients. These post-training coaching commitments can be negotiated in a fashion that suits each participant's time schedule and/or requirements.

There is no additional fee for this commitment and it is understood to be as follows:

1. The initial session includes all the tools and assessments used for our in-class training and the coaching partnership is seen as part of the training certification process.
2. The coach's job in the post-training coaching sessions is to assist the other person (the coachee) in staying focused on achieving their results. The coaching responsibility is to ask how best they can assist in moving forward. Each partner agrees to work in as honest and straightforward manner as possible but the power of the coaching process can only be given by the one being coached.
3. By signing this agreement, both training coaches agree to honour all appointment times and to notify each other with a 48 hour time period if the schedule has to be changed.

COACH / DATE

COACHEE / DATE

WAIVER FORM

YOUR NAME: _____

Please read, answer, sign and return to your instructor/coach. Our training session will take place at: Ananda Ashram, Monroe, New York.

Home Tel. Phone _____ **Cell Phone** _____

Please let us know if there are some health concerns we should be aware of during the course and any action that would be required on our part.

My family physician is: Name _____ Phone _____

Emergency contact person _____ Phone _____

Relationship of this contact person _____

I agree that I will be bound by the rules of the training the sessions.

In consideration of my participating in these sessions, I hereby release, waive and discharge Natural Health and Wellness of New England, on my own behalf from any and all claims or liability for loss, injury or death which may be suffered, sustained or arise in any way whatsoever as a result of, or in connection with these sessions. The participant acknowledges the risks involved in participating in the program and assumes all responsibility, and waives any claims s/he may have. The client agrees that they have informed the organizers of any relevant medical (health or mental) concerns that they may have.

I also state that participating in the coaching training sessions that they do not replace any medical or other health-care professional and that I can end these sessions as established in the coaching agreement.

Signature: _____ Date: _____

I accept all the terms and conditions herein and hereby state that the medical and personal information is correct.

CLIENT PERSONAL DATA SHEET*

NAME: _____

ADDRESS: _____

HOME TELEPHONE # _____

WORK TELEPHONE # _____

CELL TELEPHONE # _____

EMAIL: _____

FAX: _____

OCCUPATION SITUATION: _____

EMPLOYER: _____

DATE OF BIRTH: _____

PARTNER: _____

NAME AND AGES OF CHILDREN:

OTHER: _____

***All information is held in the strictest of confidence.**