

Please complete this form to help us understand your teen's strengths, needs, school experience, current supports, and goals for coaching.

TEEN & PARENT / GUARDIAN INFORMATION

Teen's preferred name	Teen's date of birth
Teen's pronouns	Teen's age
Parent/guardian name	Relationship to teen
Parent/guardian phone	Parent/guardian email
Who does the teen live with?	

What led you to seek coaching for your teen at this time?

What are the three most important areas where you hope coaching can help?

SCHOOL INFORMATION & CURRENT EXPERIENCE

School name	Current grade

School district	Type of school

Current school performance:

☐ Doing very well	☐ Generally doing well
☐ Mixed	☐ Struggling
☐ Significant concerns	☐ Unsure

What subjects or areas of school are strengths for your teen?

What subjects or areas are most difficult?

What does your teen struggle with most at school? (attention, starting/completing work, organization, homework, tests, attendance, transitions, grades, etc.)

Are grades, missing assignments, attendance, tardiness, or school refusal currently concerns? Please explain.

How does your teen feel about school right now?

ACCOMMODATIONS & SCHOOL SUPPORTS

Does your teen currently have:

- ☐ IEP
- ☐ Informal accommodations
- ☐ No accommodations
- ☐ Unsure
- ☐ 504 Plan
- ☐ Gifted plan/program
- ☐ Evaluation in progress

If your teen has an IEP, 504 Plan, or other accommodations, what supports are currently in place?

Which accommodations or supports seem to help the most?

Are there accommodations or supports you believe are needed but are not currently being provided?

Has your teen had psychoeducational, neuropsychological, learning, speech/language, OT, or other school-related evaluations? Please describe.

Does your teen receive tutoring, academic coaching, special education services, school counseling, or other supports?

Any concerns with teachers, peers, bullying, disciplinary issues, or feeling misunderstood at school?

NEURODIVERGENCE & SUPPORT HISTORY

Current or previous diagnosis:

- | | |
|---|---|
| ☐ Autism/ASD | ☐ ADHD/ADD |
| ☐ Both | ☐ Learning difference |
| ☐ Anxiety/mood concern | ☐ Other |
| ☐ No formal diagnosis | ☐ Evaluation in progress |

Please share diagnoses, evaluations, medications, therapy, coaching, or other supports that would be helpful for us to know about.

DAILY FUNCTIONING

Challenges with organization, time management, remembering responsibilities, or completing tasks?

Challenges with emotional regulation, frustration, transitions, or unexpected changes?

How is your teen doing with sleep, hygiene/self-care, routines, chores, and age-appropriate independence?

STRENGTHS & INTERESTS

What are your teen's greatest strengths?

What interests, hobbies, activities, or topics are especially important to them?

SOCIAL & FAMILY EXPERIENCE

How would you describe your teen's friendships and social relationships?

Challenges with making/keeping friends, social situations, communication, isolation, or conflict?

How does your teen communicate when overwhelmed, frustrated, or needing help?

What tends to create conflict or stress at home?

What approaches work best when supporting or motivating your teen?

ALCOHOL / DRUG USE

To your knowledge, has your teen used alcohol, cannabis, nicotine/vaping products, or other drugs?

- ☐ No
- ☐ Yes
- ☐ Unsure
- ☐ Prefer to discuss privately

If yes or if you have concerns, briefly describe what you know or have observed.

Any other safety, behavioral, or wellbeing concerns the coach should know about?

FUTURE PATH & INDEPENDENCE

Is your teen thinking about life after high school?

- ☐ College
- ☐ Trade/vocational school
- ☐ Employment
- ☐ Another path
- ☐ Not sure yet
- ☐ Not currently discussing it

What interests, strengths, careers, college programs, trades, or future paths has your teen expressed interest in?

What skills do you think your teen needs to build for greater independence?

COACHING GOALS

Areas you hope coaching may support:

- ☐ School success
- ☐ Executive functioning
- ☐ Organization/time management
- ☐ Emotional regulation
- ☐ Communication
- ☐ Social relationships
- ☐ Self-advocacy
- ☐ Confidence/self-understanding
- ☐ Independence/life skills
- ☐ Motivation
- ☐ Career exploration
- ☐ College/trade planning
- ☐ Family communication
- ☐ Other

What do you believe your teen would like to get from coaching?

Where might your goals for coaching differ from your teen's goals?

If coaching were successful, what changes would you hope to see over the next three to six months?