

Paramount Transitions

15400 W. 64th Ave, 9E, Ste 160, Arvada, CO 80007

(303)431-3092

Emotional Intelligence Assessment Agreement

Name _____ Email _____
Address _____
Phone # (H) _____ (C) _____

Please review this agreement, sign it, and email it to me prior to our first session.

Congratulations on taking a step toward increasing your chances for reaching your definition of success!

We will agree on a time for our Feedback Session based on when you are able to take the assessment. One week prior to our call, I will email you instructions on taking the Bar-On EQi, a standardized Emotional Intelligence test. Please complete the assessment at least 3 business days prior to our Feedback Session. Once I receive your results, I will create a draft of an Action Plan for you based on your scores. During our Feedback Session, we will review your profile results and determine how to leverage your strengths as well as which areas might benefit from change. I will then complete the Action Plan that has been mutually agreed upon and email it to you.

Call me at: 303-431-3092. Please call right on time, as I may have calls before and after yours. Once that time is established it will be reserved for you. If you need to cancel an appointment, please provide at least 24-hour notice or you will be charged for the appointment. The fee is \$350 due a week prior to taking the assessment.

You may decide to sign up for coaching with me to work on putting your Action Plan into effect. We can discuss this possibility during our Feedback Session or you make take some time to try to put the Action Plan into effect and call me later for coaching. The choice is yours; there is no obligation to sign up for coaching.

You are at free will. All final decisions are yours to make. As your coach, I will support you, guide you, and assist you in transforming your life. However, the real work is yours to do and you are at choice on how far and how fast you want to go. You accept responsibility for both your actions and decisions.

Although I am trained in psychotherapy, I do not engage in the practice of psychotherapy with my coaching clients. If issues arise that are best dealt with in a therapeutic context, I expect you to seek appropriate treatment or I will refer you to appropriately trained professional licensed therapists.

The information you share with me will remain confidential unless you give specific permission to release the information or if I am required to release the information by law (i.e. suicidality, homicidality, suspected child/elder abuse/neglect). Limited client contact information may be shared with the International Coach Federation (ICF) solely for the purpose of coach accreditation.

I am looking forward to working with you and helping you to achieve your goals. I believe that each of my clients is unique, creative, and capable of moving their own life forward. If you have any questions, please ask me prior to signing this form.

Client Signature Date