Student Name:

Date:

Applicants: What schools are you applying to? Which are safety, target and reach?

What do you plan to do with your improved academic performance?

(i.e. Study human biology in college, get my MBA, practice law)

Do you under-study, get bogged down in studying details, get distracted easily etc.?

Do you experience stress not discussed in our survey? Please explain.

**HEALTH HABITS**

Please record your typical breakfast, lunch and dinner.

Do you tend to undereat or overeat? Eat enough vegetables? Drink enough water?

How much sugar do you consume on daily? Sodas, dessert, chocolate, honey etc.

Do you engage in cardiovascular exercise and strength training? Please describe.

Describe your sleep schedule. Do you go to bed late, fall asleep regularly, sleep through the night etc.

Do you have experience with meditation, yoga, coaching or counseling? Explain.

Do you have any learning differences or psychological conditions?

Are you taking any medications? If so, which ones? Please include dosage.

How open are you to the ability of mindfulness to create behavioral change?

0 1 2 3 4 5 6 7 8 9 10

 Highly Skeptical Strongly Believe

Do you have any life circumstances that could interfere with our work and your commitment? What are they, and how can we proceed to ensure our success?

Do you have any requests of us during our work?

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(Date)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Student)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Instructor)