

# Your Personal Strategy Document

Contact Janet after completion for personal coaching options to help you address and advance any area you'd like to improve!

*It's time you achieve more success with less stress!*

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Your Full Name:

Phone Number:

Address (Street, City, State, Zip Country):

Email:

Occupation:

Date of Birth:

Gender:  Female  Male

Marriage Status:  Married  Single  Divorced

Please briefly describe how you heard about my coaching services and why you would like a Strategy Session with me:

*This worksheet is based on Janet's:*

Stressless  
Success  
Shift™

Accelerated  
High Performance  
Program

**Contact Janet**

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**Please rate yourself in the following areas of your life on a scale of 1 (lowest) to 10 (highest): (Type your response above the line)**

Clarity: \_\_\_\_\_

Do you feel you are clear about who you are, your purpose, and the direction you want to go in life?

Energy: \_\_\_\_\_

Do you consistently have enough mental and physical energy needed to excel, accomplish your goals, and feel motivated and happy?

Courage: \_\_\_\_\_

Do you take action and consistently express who you truly are and what you truly think, need, and desire with the world?

Productivity: \_\_\_\_\_

Are you consistently focused and effective, and are you good at minimizing distractions and maintaining priorities?

Influence: \_\_\_\_\_

Do you feel you have the social influence with your family, friends, and team needed to accomplish your goals?

1. What do you do for a living, and why did you choose that career?

2. What are your top 3 goals you are striving to achieve right now?

3. What major stressors or challenges are you struggling with right now?

## Questions Continued:

4. When you feel like your most successful and happy self, what makes you feel that way?

5. What would your dream life look like if you could wave a wand and make it happen?

6. What else has prevented you from having that dream life?

7. What goal or dream have you ever given up on or failed at, and what do you believe caused you to stop or fail?

8. What 3 big changes would you like to make in your life in the next 12 months?

9. What are you most proud of and excited about in your life?

## High Performance Questions:

1. What negative recurring thoughts, fears, or behaviors would you like to overcome in order to feel more psychologically free, confident and successful?
2. What eating, exercise or general health habits would you like to begin or break in order to feel stronger and more healthy physiologically?
3. What distracts you the most from being more productive, and what major projects or missions are you struggling to complete faster or more efficiently?
4. If you were more persuasive or influential, what dream or desire would you ask others to support you in achieving?
5. When do you struggle to be fully present in your day or in any of your relationships?
6. How purposeful do you feel in living each day, and how would you describe your purpose?
7. Why would you like to work with a high performance coach?
8. Why do you feel you could be a great student or coaching client if we worked together?