

# Quality of Life Check-up



E-mail

Name

Date

**Step 1: Rate your current level of satisfaction in each area. (10 = Totally Satisfied)**

<b>Health &amp; Fitness:</b> High Quality Food, Self-Care, Exercise	1-10	
<b>Relationships:</b> Friends, Family, Partnerships	1-10	
<b>Money &amp; Finance:</b> Income & Assets, Expenses & Liabilities, Financial Planning	1-10	
<b>Creativity &amp; Balance:</b> Creative Expression, Life Design (Plan), Environmental Excellence	1-10	
<b>Business &amp; Career:</b> Business Plan, Career Goals, Professional Development	1-10	
<b>Mind &amp; Spirit:</b> Intellectual Development, Reflection, Meditation/Prayer	1-10	
<b>Legacy:</b> Leadership & Community Development, Acts of Philanthropy	1-10	

*You are worth it!  
Get coaching 2 or 4 times per month.*

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