



-Kayse Budd, MD-  
Mentorship III & IV Programs  
www.kaysebudd.com



Intake Form:

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
Time of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Address:

\_\_\_\_\_  
City, \_\_\_\_\_ State, \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number: home: \_\_\_\_\_ cell: \_\_\_\_\_

Email: \_\_\_\_\_

Current Employment: \_\_\_\_\_

Position Title: \_\_\_\_\_

Education: \_\_\_\_\_

Degree(s): \_\_\_\_\_

What brings you to consider mentorship at this exact moment? Has something interesting happened in your life? Are you at a crossroads?

\_\_\_\_\_

\_\_\_\_\_

Goals for mentorship (ie, self-development, professional growth, career change, spiritual development and learning, etc.) \_\_\_\_\_

\_\_\_\_\_

Personal strengths: \_\_\_\_\_

\_\_\_\_\_

Personal or educational weaknesses (that you know of): \_\_\_\_\_

\_\_\_\_\_

3 fun facts about yourself: \_\_\_\_\_

\_\_\_\_\_

Have you experienced coaching or mentorship before (if yes, what was your experience—how was it helpful/not helpful) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Any current health or personal struggles you would like me to know about or that may be relevant? \_\_\_\_\_

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Do you have some specific things you'd like to learn or focus on in your mentorship (esp important for those in the 4-session program)?

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What drew you to pursue this experience with me as the mentor?

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Describe your spirituality and/or mind-body practices: \_\_\_\_\_

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Please share 1-3 "peak transformational (or mystical) experiences" that helped you grow, expanded your worldview, or changed you: \_\_\_\_\_

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What are you most looking forward to about this process? \_\_\_\_\_

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What, if anything, are you apprehensive about? \_\_\_\_\_

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Notes (Anything else I should know):

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Wonderful! Welcome...

