New Client Questionnaire Confidential

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. How many years in lending?
2. Do You use a Contact Management System (Y/N) If Applicable how long? What CRM do you use?
3. How many people in your data base? How many would you consider part of you

Sphere of Influence?

1. How often do you keep in touch with your clients and how?
2. Source of Current Business Leads?
3. How many units per month on avergae?
4. Please list the top activities you use to generate new business?
5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
9. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
10. Please fill out your stats from the past 2 years below ~

|  |
| --- |
| **Statistics** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | #New Loans | #Refi |  Total Units |  Total Volume |  Net Income |
| **2016** |  |  |  |  |  |
| **2017** |  |  |  |  |  |

1. Do you know your $ per hour? If yes, what is it?
2. How many hours per day do you work?
3. Do you have a written set of goals? Yes No
4. If yes to #12, how often do you look at your goals? Daily\_\_ Weekly\_\_ Monthly \_\_\_ Annually\_\_\_
5. Do you have a bucket list? If yes what are 2 things you liked to do this year?
6. Top 3 -5 Goals you would like to achieve from ongoing coaching?
7. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. If you could change (1) one aspect of your business today, what would it be?
2. Is there anything else you’d like your coach to know before you get started on this journey? (The more you share it enriches the relationship and growth of your business and personal life).