

The Wellness Source



Building Optimal Health for all People, to Educate and to Serve with Integrity

Confidential Health Questionnaire

This questionnaire is for you to focus on specific areas or objectives regarding your health.

Instructions: We have listed several possible objectives on the left side of the page (feel free to add your own).

- 1) Please circle the corresponding number which best represents the **importance** that objective has in your life.
- 2) On the right fill in what percentage (0-100%) you are **experiencing now** with that objective.

Objective	Low Importance					High	%
My body is overall healthy	0	1	2	3	4	5	_____
My energy is great throughout the day	0	1	2	3	4	5	_____
My mind stays clear throughout the day	0	1	2	3	4	5	_____
I am at a specific weight	0	1	2	3	4	5	_____
I eat correctly	0	1	2	3	4	5	_____
I know how to cook healthy food	0	1	2	3	4	5	_____
I exercise regularly	0	1	2	3	4	5	_____
I have a healthy sex drive	0	1	2	3	4	5	_____
I know which supplements are right for me	0	1	2	3	4	5	_____
When I go to the doctor, my blood tests are good	0	1	2	3	4	5	_____
I can reduce the amount of pharmaceuticals I take	0	1	2	3	4	5	_____
I sleep well	0	1	2	3	4	5	_____
My skin is healthy	0	1	2	3	4	5	_____
My stress level is low	0	1	2	3	4	5	_____