

**A NOTE ON THIS ASSESSMENT**

This is not a typical intake form. We are here to understand the full picture of who you are — your financial reality, your assets, your God-given calling, and the ceiling of what you can realistically build. Answer honestly.

**01 · PERSONAL IDENTIFICATION**

Full Legal Name *	Preferred Name
<input type="text"/>	<input type="text"/>
Date of Birth	City & State / Country of Residence *
<input type="text"/>	<input type="text"/>
Phone (Primary) *	Email Address *
<input type="text"/>	<input type="text"/>
Marital Status	Number of Dependents
<input type="text"/>	<input type="text"/>

**02 · PROFESSIONAL BACKGROUND**

Current Title / Primary Role \*

Current Employer / Organization	Industry / Sector
<input type="text"/>	<input type="text"/>
Years in Current Field	Highest Level of Education
<input type="text"/>	<input type="text"/>

Briefly describe what you do professionally and what you are known for:

**03 · ENGAGEMENT TIER**

Select Engagement Level

Individual (\$2,500–\$5,000)
  Professional (\$5,000–\$10,000)

Nonprofit / Ministry (Custom)
  Exploring / Not Yet Decided

**THE CORE QUESTION**

What is the single most pressing financial need or constraint holding you back right now?

*This is the foundation of everything we build together. Be specific and honest.*

What does this financial constraint prevent you from doing or becoming? \*

*Be as specific as possible — dreams deferred, opportunities missed, relationships strained...*

**04 · CURRENT FINANCIAL POSITION**

Annual Personal / Household Income	Monthly Take-Home (After Tax)
<div style="border: 1px solid #ccc; height: 20px;"></div>	<div style="border: 1px solid #ccc; height: 20px;"></div>
Total Outstanding Debt	Monthly Debt Obligations
<div style="border: 1px solid #ccc; height: 20px;"></div>	<div style="border: 1px solid #ccc; height: 20px;"></div>
Liquid Savings / Cash Reserves	Retirement / Investment Accounts (est.)
<div style="border: 1px solid #ccc; height: 20px;"></div>	<div style="border: 1px solid #ccc; height: 20px;"></div>
Personal Credit Score Range	
<input type="checkbox"/> Excellent (720+)	<input type="checkbox"/> Good (680–719)
<input type="checkbox"/> Poor (<620)	<input type="checkbox"/> No Credit / Rebuilding
	<input type="checkbox"/> Fair (620–679)
	<input type="checkbox"/> Unknown

**05 · INCOME SOURCES**

Current Income Sources (select all that apply)

- |  |  |
|--|--|
| <input type="checkbox"/> Salary / W-2 Employment | <input type="checkbox"/> Self-Employment / Freelance |
| <input type="checkbox"/> Business Ownership      | <input type="checkbox"/> Real Estate Income          |
| <input type="checkbox"/> Investments / Dividends | <input type="checkbox"/> Ministry / Nonprofit Income |
| <input type="checkbox"/> Government / Pension    | <input type="checkbox"/> Multiple Sources            |

Describe any side income, business ventures, or income streams you are developing:

Capital Needed (Immediate)	Ideal Timeline to Solve
<div style="border: 1px solid #ccc; height: 20px;"></div>	<div style="border: 1px solid #ccc; height: 20px;"></div>

**ASSET DISCLOSURE INSTRUCTIONS**

Include ALL personal assets AND any assets under your governance, authority, or stewardship (elected/appointed roles).

**06 - PERSONAL ASSETS (DIRECTLY OWNED)**

ASSET CLASS	OWNED?	CURRENT MARKET VALUE	NOTES / DETAILS
Primary Residence	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Est. Market Value</i>	
Investment / Rental Properties	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Est. Market Value</i>	
Land / Vacant Lots	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Est. Market Value</i>	
Vehicles (Personal / Collectible)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Est. Market Value</i>	
Business Ownership / Equity	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Est. Market Value</i>	
Stocks / Mutual Funds / ETFs	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Est. Market Value</i>	
Retirement Accounts (401k, IRA, etc.)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Est. Market Value</i>	
Cash / Savings / Money Market	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Est. Market Value</i>	
Life Insurance (Cash Value)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Est. Market Value</i>	
Jewelry / Art / Collectibles	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Est. Market Value</i>	
Intellectual Property / Royalties	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Est. Market Value</i>	
Cryptocurrency / Digital Assets	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Est. Market Value</i>	
Mineral / Extraction Rights	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Est. Market Value</i>	
Other Asset (specify in notes)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Est. Market Value</i>	

**07 - GOVERNANCE / STEWARDSHIP ASSETS (UNDER YOUR AUTHORITY)**

*If you hold any elected, appointed, or leadership position — list assets under your governance or jurisdiction:*

ASSET CLASS	OWNED?	CURRENT MARKET VALUE	NOTES / DETAILS
Government / Public Property	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Est. Market Value</i>	
Municipal Funds / Public Budget	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Est. Market Value</i>	
Church / Ministry Assets	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Est. Market Value</i>	
Nonprofit Endowments / Funds	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Est. Market Value</i>	
Community Development Resources	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Est. Market Value</i>	
Other Governed Assets (specify)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Est. Market Value</i>	

**THE CALLING QUESTION**

If money were completely removed as a factor — what would you do for free for the rest of your life to serve and bless others?

*Do not edit this answer. Write your first honest response. This is where true wealth strategy begins.*

**08 - CORE PASSION & VISION FOR THE FUTURE**

What is your core passion — the problem in the world you feel called to solve? \*

*Not your job title. Not your resume. What breaks your heart? What makes you come alive?*

Describe your vision for the future — what does the world look like when your work is done? \*

*Be bold. Be specific. What legacy are you building?*

**09 - VISION IF FULLY RESOURCED**

If you had all the capital and resources you needed — what is the NEXT concrete step you would take? \*

*A specific action, not a vague dream. What is the first thing you would do tomorrow?*

Where do you see yourself in 5 years if this consulting engagement fully succeeds?

**10 - ULTIMATE ATTAINABLE WEALTH**

Think realistically but ambitiously: Given your skills, your market, your calling, and the assets you hold — what is the realistic ceiling of wealth you could attain in your lifetime if you were properly guided and resourced?

Realistic 10-Year Net Worth Target

Realistic Annual Income Target (10-Year)

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Your Primary Wealth-Building Levers (select top 3)

- |  |   |
|--|---|
| <input type="checkbox"/> Business Ownership / Exit     | <input type="checkbox"/> Real Estate Portfolio      |
| <input type="checkbox"/> Investments / Markets         | <input type="checkbox"/> Royalties / IP Licensing   |
| <input type="checkbox"/> Speaking / Writing / Media    | <input type="checkbox"/> Ministry / Nonprofit Scale |
| <input type="checkbox"/> Government / Policy Influence | <input type="checkbox"/> Multiple Streams           |

What has historically held you back from reaching your full financial potential?

*Be honest. Patterns, mindsets, relationships, systems, decisions...*

**CONFIDENTIALITY & AUTHORIZATION**

I voluntarily share this information and understand it is held in strict confidence. I am ready to engage fully and honestly.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Printed Name \_\_\_\_\_