**Client interview template**

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| **Name of client:** | | |
| **Date of birth:** | | **Gender: M / F** |
| **Physical assessments** | | |
| **Height:** |  | **Other assessments:** |
| **Weight:** |  |  |
| **BMI:** |  |  |
| **Client barriers:** | | |
| **Client motivators:** | | |
| **Strategies to overcome barriers and maximise motivators:** | | |
| **Lifestyle, occupation and hobbies:** | | |
| **Exercise preferences:** | | |
| **Client’s overarching goals** | | |
|  | | |
| **SMART goals** | | |
| **Short-term:** | | |
| **Medium-term:** | | |
| **Long-term:** | | |
| **How will goals be reviewed?** | | |
| **Short-term:** | | |
| **Medium-term:** | | |
| **Long-term:** | | |