



QUESTIONNAIRE FOR FOUNDATIONAL WELLNESS

What are top 4 areas of concern you would like to address the most:

1. _____
2. _____
3. _____
4. _____

1 Which of the following best describes your energy level?

- A. I wake feeling refreshed always
- B. It's hit-or-miss
- C. I rarely have enough energy

2 What would you say best describes your nightly sleep?

- A. I regularly enjoy peaceful slumber
- B. I struggle to drift off
- C. I have difficulty maintaining restful nights of quality shuteye
- D. What is sleep?

3 Do you feel rested when you wake up in the morning?

- A. Yes, I am ready to start my day!
- B. Sometimes but not every day.
- C. Never, I need more sleep.

4 How often do you feel body aches?

- A. Never
- B. Some days
- C. Most days
- D. Every day

5 How often do you feel good (emotionally/physically)?

- A. I feel fantastic almost all the time!
- B. I am getting better every day!
- C. Sometimes, I feel blah.
- D. There are more days feeling bad than good.

6 How well can you focus?

- A. I can focus and if I can't, I know why.
- B. Some days I have a hard time focusing, but not every day.
- C. Most days I have a difficult time focusing.

7 How often do you feel overwhelmed?

- A. Never, bring it on!
- B. Sometimes, if I have too much on my plate.
- C. Always, I need help!

8 How often do you feel sad or in a bad mood?

- A. Never
- B. Only sometimes
- C. Often
- D. Daily

9 How often do you experience reactivity to food/environmental triggers?

- A. Never
- B. Only seasonal
- C. I have to avoid a lot of foods/triggers most of the time
- D. I am not sure what my triggers are

10 How would you rate your overall health for your age group?

- A. Top of my game!
- B. Better than most >50%
- C. Average 50%
- D. Less than average <50%



QUESTIONNAIRE FOR FOUNDATIONAL WELLNESS

11 How is your digestion?

- A. Never better
 - B. Could use some support
 - C. I'll take all the support I can get
-

12 How often do you feel that your immune system would benefit from additional support?

- A. All the time
 - B. Sometimes
 - C. Not often
-

13

- A. _____
 - B. _____
 - C. _____
 - D. _____
-

14

- A. _____
- B. _____
- C. _____
- D. _____

15

- A. _____
 - B. _____
 - C. _____
 - D. _____
-

16

- A. _____
- B. _____
- C. _____
- D. _____