

Residential Feng Shui Questionnaire

I am happy that you have decided to help yourself to reach your full potential through applying Feng Shui and enhancing the balance and support that your home provides you. Please complete this assessment questionnaire thoughtfully with attention to your goals. These questions are designed to help you create a clear focus and intention. Your answers will inform our work together so that I may provide you with the most fitting techniques to transform your home into a uniquely nurturing and supportive environment.

Simply type your answers into the open boxes; the boxes will expand as needed.

Name		
Address	City/State/Zip	
Phone #	Email	
Occupation	Spouse	

Please list all the people that live in your home, including yourself.

Name	Date of Birth	
Name	Date of Birth	

?	What year was your home built?	
?	Has there been any major remodeling?	
?	What is the approximate square footage?	
?	Do you rent or own?	
?	For how long?	



Do you know the home's history? Did the previous occupants move on in a prosperous way?
Are you aware of any positive or negative things that have happened in your home?
Have you noticed any changes in your life, positive or negative, since moving to this home?
How do you feel when you step into your home? Do your spirits rise or fall?
Do you find that you like some rooms more than others? Which?
Would you like to add any further comments about how you feel in your home?
What is your overall intention for your home? Why did you decide to have a Feng Shui Consultation? Please take time to be as thorough as possible.



Overall Assessment

Please review the following nine themes and associated questions, and assess how satisfied you feel regarding each aspect of your life. In the first box following each question, rate your satisfaction on a scale of 1–5 (1 meaning least satisfied and five meaning most satisfied). In the larger box, you may add any personal comments you like.

1. Career & Life's Journey

- Are you passionate about what you do for a living; does it feel fulfilling?
- Do the people you work around acknowledge and respect you?
- Do you like to try new things; do you feel that anything is possible?

Scale of 1-5 (1 meaning least satisfied and five meaning most satisfied). In the larger box, you may add any personal comments you like.

2. Knowledge, Wisdom & Self-Cultivation

- Do you feel free to grow and learn new things; does it seem more out there?
- Does your life and schedule allow time for cultivating new knowledge and awareness?
- Do you feel that you are intelligent and make wise decisions?

Scale of 1-5 (1 meaning least satisfied and five meaning most satisfied). In the larger box, you may add any personal comments you like.

3. Family & Community

- Do you have a good relationship with the family with whom you live?
- Do you feel that your family or your parents control or overlook you?
- Do you feel tension or recognize too much conflict or arguing within your family?
- Do you feel connected to a sense of community?



Scale of 1-5 (1 meaning least satisfied and five meaning most satisfied). In the larger box, you may add any personal comments you like.

4. Wealth, Prosperity & Abundance

- Do you feel fortunate in your life; are good things happening to you?
- Do you feel that you spend money wisely, or does it seem to 'disappear'?
- Do things show up when you need them without expectation; does your life feel abundant?
- Do you feel you deserve wealth and prosperity?

Scale of 1-5 (1 meaning least satisfied and five meaning most satisfied). In the larger box, you may add any personal comments you like.

5. Fame & Reputation (How you shine your light in the world)

- Do you feel good about yourself and who you are?
- Are you overly concerned about what people think about you?
- Do you feel you have gifts and wisdom, 'light' to share with others?
- Do you feel free to share those gifts?

Scale of 1–5 (1 meaning least satisfied and five meaning most satisfied). In the larger box, you may add any personal comments you like.

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6. Love & Relationships

- Do you find it easy to love yourself, treat yourself well, and care for your emotional, spiritual, and physical needs?
- Do you find that you can flow with your partner and work together on life's everyday tasks?
- Does communication between you and your partner seem strained most of the time; is it difficult to find time to share your day and feelings?
- If you are single, do you seem to attract the 'wrong type' or find it challenging to meet appropriate potential partners?

Scale of 1-5 (1 meaning least satisfied and five meaning most satisfied). In the larger box, you may add any personal comments you like.

7. Creativity, Children & Inner Child

- Are you creative and excited about life and starting new projects?
- If you are a parent, is your relationship with your children rich and positive?
- If you want kids, are you having trouble planning or conceiving?
- Do you feel connected to yourself and the playfulness within you?

Scale of 1–5 (1 meaning least satisfied and five meaning most satisfied). In the larger box, you may add any personal comments you like.



8. Travel & Helpful People

- Do you feel that you have support from friends and family?
- Are you able to receive help from others when they offer it, or do you try to 'go it alone'?
- Does it seem that the right people show up in your life at the right time, being 'angels' in some way?
- Do you travel as much as you would like; does it feel like you are missing opportunities to see the world?

Scale of 1-5 (1 meaning least satisfied and five meaning most satisfied). In the larger box, you may add any personal comments you like.

9. Health, Unity & Balance

- Do you have health concerns that seem to go from one thing to another?
- Does your life feel in balance; do you eat well and exercise in keeping with your goals?

Scale of 1-5 (1 meaning least satisfied and five meaning most satisfied). In the larger box, you may add any personal comments you like.



After reviewing these themes and questions (and talking with your partner if you have one), please take a few minutes to explain any of these areas that don't feel good to you right now. Maybe you feel that they are blocked somehow, or something missing or hindering you from living and feeling your full potential. What would you like to change about how your life feels?

Which of the above nine themes seem to need attention for improvement in your life? Please explain below.

Please draw a floor plan of your home.

- Make the floor plan as close to scale as possible;
- Label each room;
- Feel free to use the back for other floors of the house if necessary;
- Label North, South, East, and West;
- Be as accurate as possible with the floor plan and compass directions.

Thank you for taking the time to complete this questionnaire. Please email the completed questionnaire with your floor plan at least 48 hours before your appointment: info@joinamandasophia.com I look forward to our time together.

Please note: The fee for a Home Consultation is \$325 per hour with a two-hour minimum. Payment is due after your appointment. Twenty-four hours' notice is required for cancellation; any cancellations within 24 hours before a scheduled appointment will incur a \$100 fee.

All information you provide will be held in the strictest of confidence. The International Feng Shui School, Amanda Sophia, and her consultants serve as a reference and guide for Feng Shui; their services and consultations are not intended to substitute for a licensed medical provider's care. Please keep in mind that individual results vary based on client interest and participation; no outcomes are guaranteed.