

**CLIENT INFORMATION**

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Street Address \_\_\_\_\_ City, State, Zip Code: \_\_\_\_\_  
Your role in your organization: \_\_\_\_\_

**PROJECT TYPE (Please check all that apply)**

- Strategic/High level,
- Tactical/Implementation

**CHANGE PROJECT TYPE (Please check all that apply)**

- Strategy Development,
- Restructuring and Reorganization,
- Culture Change,
- Re-Engineering,
- Technology and System Driven Change,
- Flexible Work
- Environment & Sustainability

**GENERAL OD (Please check all that apply)**

Strategic Planning,  
 Process Consulting  
 General OD  
 Diagnostic and Readiness  
 Graphic Recording  
 Meeting Facilitation  
 Program Development (PMO)  
 Other: \_\_\_\_\_

Leadership Development,  
 Exec communications,  
 Exec Coaching,  
 Woman In Leadership Programs,  
 Coaching and Development Programs,  
 Meeting Facilitation,  
 Other: \_\_\_\_\_

Implementation,  
 Change Management,  
 Change Project Management,  
 Change Communication Strategy,  
 Risk Management,  
 Assessment and Metrics Development,  
 Change Readiness Assessments,  
 Meeting Facilitation,  
 Other: \_\_\_\_\_

Learning and Development  
 Training Program Development,  
 Succession planning,  
 Mentorship Programs,  
 Instructional Design,  
 E-Learning course Development,  
 Team Building,  
 Other: \_\_\_\_\_

**CONTACT INFORMATION**

**What is the best way to contact you**  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Other: \_\_\_\_\_

**What is the best time of day to contact you?**  
\_\_\_\_\_

