THE CEO INITIATIVE™

The Business of Me™ Founding Profile

1 Identity, Life Context and Executive Development Baseline

This is the start of your **Business of Me** journey. Share who you are today, what has shaped you, and what you want to build. Your answers help us plan with you.
You may skip a question, ask for help, or say you are not sure. Before you begin, staff must explain who can see your answers, what must be shared, and any required program steps. This form is not permission to contact others or join research.

Name you use

Date of birth (month / day / year)

Race (your words; optional)

Ethnicity or culture (optional)

Language or help you need to take part

Date completed

What brings you here? What would make this worth your time?

What are you good at? What people, roles or groups matter to you?

How do others describe you? Which parts fit, and which do not?

What do you believe about yourself now? What helped shape that belief?

When do you feel most like yourself? Where do you feel you have to act differently?

ID#_____

2 My foundations

Think about the past 30 days. How often could you count on each need being met? Rate each row. A low number points to a need we can talk about; it is not a grade.

1) Almost never 2) Rarely 3) Sometimes 4) Usually 5 Almost always D) Prefer not to answer N) Does not apply

Need	Choose one answer for each row
Shelter A steady place to live and sleep.	○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ D ○ N
Food Enough food to eat.	○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ D ○ N
Water Safe water to drink.	○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ D ○ N
Safety Being safe in my daily life.	○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ D ○ N
Clothing and hygiene Clothes and supplies to keep clean.	○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ D ○ N
Healthcare Health care I need, including medicine.	○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ D ○ N
Rest A place and time to get enough sleep.	○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ D ○ N
Love and care Someone I can count on to care about me.	○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ D ○ N
Belonging People or a group where I feel accepted.	○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ D ○ N
Transportation A way to get where I need to go.	○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ D ○ N
Communication A way to reach people when I need to.	○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ D ○ N
Money Money or support to cover basic needs.	○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ D ○ N

Which need worries you most, or may become less steady soon?

Would you like help with a need? If so, which one?

3 How I get things done

Think about the past 30 days. Choose the answer that best fits what you do. You can skip any row. There are no perfect scores.

1) Rarely **2) Sometimes** **3) Often** **4) Almost always** **U) Not sure** **D) Prefer not to answer**

I start important tasks.	○ 1	○ 2	○ 3	○ 4	○ U	○ D
I pause before I react.	○ 1	○ 2	○ 3	○ 4	○ U	○ D
I stay focused on the task.	○ 1	○ 2	○ 3	○ 4	○ U	○ D
I use my time wisely.	○ 1	○ 2	○ 3	○ 4	○ U	○ D
I remember important information.	○ 1	○ 2	○ 3	○ 4	○ U	○ D
I adapt when things change.	○ 1	○ 2	○ 3	○ 4	○ U	○ D
I get myself back on track.	○ 1	○ 2	○ 3	○ 4	○ U	○ D
I manage my emotions well.	○ 1	○ 2	○ 3	○ 4	○ U	○ D
I finish what I start.	○ 1	○ 2	○ 3	○ 4	○ U	○ D
I keep things organized.	○ 1	○ 2	○ 3	○ 4	○ U	○ D

Which skill helps you most? Give one example.

Where are these skills harder to use? What helps you there?

Which skill would you like to build first?

4 My direction and my circle

What matters most to you? Name values you want to live by, or explore.

Who do you want to become? What do you want to keep or change?

My intimate circle

Name 3 or 4 trusted people who could notice your actions over time. Fewer is okay. You can build your circle later. Staff will ask you before any invitation.

1. Name, relationship, and where they see you (home, school, work or elsewhere)

2. Name, relationship, and where they see you (home, school, work or elsewhere)

3. Name, relationship, and where they see you (home, school, work or elsewhere)

4. Name, relationship, and where they see you (home, school, work or elsewhere)

With your permission, people in your intimate circle will describe the executive functioning skills they see you use (Brief 003) and give examples of your actions along the development pathway (Brief 006). You will review their feedback and share what fits your experience, what differs, and what they may have missed.

What is one small action you choose to try? What help would make it easier?

When will we review it? What will show that you tried?

As you learn, you can update your story, goals and circle. Your experiences have shaped you. You have a voice in who you become.