

County of Monterey

Match Me With a Coach- Coaching Services Application

Kudos to you for taking the next step to have a coach in your corner who will support your success!

- 1) Discuss your interest in coaching services with your manager/supervisor and obtain his/her authorization.
- 2) Prior to the start of your coaching services, your immediate manager's/supervisor's and Director's signature of approval are required on your registration form, which is to be submitted to: Catherine Crusade, Employee Engagement Manager at: crusadecm@co.monterey.ca.us
- 3) Once your form is received, Catherine will contact the coach(s) with whom you are requesting a complimentary introductory session. The coaching service provider(s) will then follow up with you. The purpose of the introductory session is for you and the coach to interview each other to determine fit.

Your Profile

Name
Classification
Personnel Number
Department
Division
Work Phone Number
Cell Phone Number (optional)
Work Email
Work Address

What type of coaching are you interested in?

- Executive/Leadership
- Career Development
- Performance Improvement
- Change Management
- If other, please pecify _____



Coaching Service Provider Information and Cost

In the table below, state each company and coach you are interested in contacting you for a complimentary introductory conversation.

Name of Company	Name of Coach	Hourly Coaching Rate	Estimated Number of Coaching Sessions	Estimated Total Cost

Billing Information

Coaching service fees will be billed to your department.

Invoices for coaching services will be sent to Catherine Crusade, Employee Engagement Manager, who will review, confirm dates of service with you and then forward to the Human Resources Department Finance Manager for processing.

All payments for coaching services are the responsibility of the coaching client’s (County employee) Department.

Both the coaching client’s immediate supervisor or manager, and Department Head must approve coaching services and are required to sign below prior to the start of a coaching program.

To ensure accurate and timely processing of invoices, please confer with your Department Finance Manager or Accounting Representative for your department specific “accounting string” information, which is required below.

Accounting String Item	Number or Code
Fund Number	
Department Number	
Unit Number	
Appropriation Code	
Object Code	

How did you learn about coaching services?

- The Leadership Learning Exchange/Coaching Program webpage
- Director
- My Manager
- Colleague
- HRD representative
- HRD Newsletter

If other, please specify _____



Your Immediate Manager's or Supervisor's Information:

Name
Classification
Work Phone Number
Cell Phone Number (optional)
Work Email

I agree that my department will pay for the total cost of coaching services for :

(name of person receiving coaching)

REQUIRED SIGNATURES

Manager's or Supervisor's Signature Date

Director's signature of approval Date

