

Client: _____

Date: _____

Practitioner: _____

Pre-Assessment Preparation

- | | |
|--|--|
| <input type="checkbox"/> Client seated upright, facing forward | <input type="checkbox"/> Hair pulled back from face |
| <input type="checkbox"/> Brow makeup removed | <input type="checkbox"/> Brows brushed to reveal natural pattern |
| <input type="checkbox"/> Lighting even on both sides | <input type="checkbox"/> Documentation tools ready |

Structural Assessment

Primary Face Shape: _____

Secondary Characteristics: _____

Forehead Height: ☐ High ☐ Medium ☐ Low

Feature Spacing: ☐ Close ☐ Average ☐ Wide

Eye Assessment

Eye Shape: _____

Lid Type: ☐ Standard ☐ Hooded ☐ Deep-set ☐ Prominent

Outer Corner: ☐ Lifted ☐ Level ☐ Drooping

Asymmetry Documentation

Brow Height Difference: ☐ Yes ☐ No If yes: _____ mm

Overall Asymmetry: ☐ Minimal ☐ Moderate ☐ Significant

Brow Condition

Overall Density: ☐ Sparse ☐ Medium ☐ Full

Hair Texture: ☐ Fine ☐ Medium ☐ Coarse

Previous Work: ☐ Yes ☐ No Over-plucking: ☐ None ☐ Mild ☐ Moderate ☐ Severe

Model Recommendation

☐ Classic ☐ Soft Harmony ☐ Elevated ☐ Expressive ☐ Modern Edge

Adaptations Needed: _____

Notes: _____