

FINDING PEACE COUNSELING, LLC

INTAKE INFORMATION

PRESENTING CONCERNS:

Describe your reasons for coming to counseling:

How long has this been happening?

How is it affecting you?

SELF-HARM & SUICIDAL HISTORY

Are you currently experiencing self-harm or suicidal behaviors? Please describe.

Do you have a history of self-harm or suicidal behaviors? Please describe.

MENTAL HEALTH HISTORY

Have you seen a counselor/therapist? Please describe.

HEALTH HISTORY

How would you describe your overall health?

Are you currently taking any medications?

Any significant past surgeries/medical problems? Please describe.

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SUBSTANCE USE INFORMATION

In the past 12 months, have you had any alcoholic beverages? Please describe.

Have you ever used substances, legal or illegal, for the intent of altering your state of mind?

LIFESTYLE INFORMATION

Are you religious/spiritual? _____ Is spirituality important to you? _____

Do you participate in religious activities? _____ What church do you attend? _____

Do you date? _____ Are you currently in a relationship? _____

How satisfied are you in this relationship? _____

Do you have someone to talk to when you are struggling? _____

Any current legal problems? Please describe. _____

How long have you been at your current job? _____ Are you satisfied with your job? _____

Any issues related to your job/school? Please describe:

FAMILY BACKGROUND

Does anyone in your family have a mental health issue? Please describe.

Who were you primarily raised by?

FINAL QUESTIONS

Any other concerns we should be aware of?

What would you like to accomplish in therapy?
