



ALIGNMENT COUNSELING  
&  
CONSULTING

## PRE-SESSION EXPLORATION

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Best Times for Sessions: \_\_\_\_\_ Time Zone: \_\_\_\_\_

How would you characterize your childhood and teenage years? Describe your relationship with your family of origin.

If you are not an only child, list your siblings and where are you in the birth order.

How would you describe your spiritual journey? Do you attend church now?



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How would you describe your physical condition? Do you have any chronic health issues or injuries that affect you on a regular basis? Are you on any medications?

What do you do for a living?

What are the three greatest challenges in your life right now?

For Couples:

How long have you been married?

How long did you date before you got married?

List Your Children and their birthdates:

If divorced and remarried, how long were you divorced before you remarried?

If divorced and remarried, how long was your previous marriage(s)?



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If divorced and remarried, list your spouse's children and their birthdates:

If divorced and remarried, and if you have children together, list those children and their birthdates:

What pain points are you experiencing in your home/marriage at this point in time?

What would your spouse say if we asked them the same question?

If there is any additional pertinent information that would help, please add that below.



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