Prior to your first appointment, **please answer all questions** below.

Family Name: Who completed the form:

Name and ages of all family members:

Length of time of parent's current relationship:

As you think about the primary reason that brings you here, how frequently does it occur? No occurrence Occurs rarely Occurs sometimes Occurs frequently Occurs nearly always

As you think about the primary reason that brings you here, how would you rate your overall concern about it? No concern Little concern Moderate concern Serious concern Very serious concern

What do you hope to accomplish through counseling?

What has the family done to deal with the difficulties?

What are your biggest strengths as a family?

Have you received prior family counseling related to any of the above problems? Yes / No

If you have received prior family counseling, when did this occur? Who did you see? What was the length of treatment? What were the problems that were treated? What was the outcome? Much worse Somewhat worse Stayed the same Somewhat successful Very successful.

If married, has either of you threatened to separate or divorce because of the current relationship problems? Yes / No Which of you made the threat?

Has anyone in the family ever struck, physically restrained, used violence against, or injured another person? Yes / No

What is your current level of stress (overall)? 1 = No stress 2 3 4 5 6 7 8 9 10 = High stress What is your current level of stress (in the relationship)? 1 = No stress 2 3 4 5 6 7 8 9 10 = High stress

Does anyone in the family currently attend individual counseling? Yes / No

Has anyone in the family ever attended individual counseling? Yes / No

Does anyone in the family have learning and/or communication difficulties and/or special needs? Yes / No If so, which family member?

Does anyone in the family drink alcohol to intoxication or take drugs to intoxication? Yes / No

Thank you for completing this. Please note that you will be asked to talk about your answers in appointments, but your family members will not be shown this form.