



Initial Intake

Client Information:

Full Name:	Date of Birth:
Legal Address:	Gender (circle what applies): Female Male Questioning Other
Best phone# to contact you:	Name of Spouse or Partner that you live with:
Email:	Physician:
Race/ethnicity:	Occupation:
Educational Background:	Sexual Identity (circle what applies): Heterosexual Gay Lesbian Bisexual Questioning Other
Insurance:	
Religious affiliation (if any):	
Name of person to notify in case of an emergency:	Telephone of emergency contact person:

Please tell me a little about your current family and/or close relationships:

Of the people you identified above, which person do you feel closest to (please briefly describe why you identified this person)?

When you are not working or in school, what do you do in your free time **with others** that restores your well-being (on average per week, how often do you engage in these activities)?

When you are not working or in school, what do you do in your free time **by yourself** that restores your well-being (on average per week, how often do you engage in these activities)?

Currently, what brings you the greatest joy and satisfaction in your life?



Please list some of your strengths that make you who you are:

Have you ever in your life experienced any of the following events?

- Drug and/or alcohol abuse (if yes, please write a brief description of when):
- Wanting and/or attempting to commit suicide (if yes, please write a brief description of when):
- Death of a close person (if yes, please write a brief description of when and who):

What medications are you currently taking (please list all)?

Are you currently experiencing any physical ailments (if yes, please briefly describe them)?

What life changes have you experienced within the last year?

Have you participated in mental health counseling previously (if yes, please briefly describe when and your goals in counseling at that time)?

What was most helpful about your previous experiences in counseling?

What changes do you hope for currently as a result of working with a counselor?

What other information is important for me to know at this time that has affected your presence here today?