

All Answers Are Confidential!

What is your reason for being here today:

Where were you born and raised: _____

Who raised you as a child: _____

In one word, how would you describe your childhood experience?

GOOD BAD TRAUMATIC PLEASANT UNPLEASANT CHAOTIC FAIR

PLEASE SPECIFY:

Have you ever been abused? No

PHYSICAL SEXUAL EMOTIONAL

IF YES, PLEASE SPECIFY:

What is your highest completed level of education: _____

Employed status:

EMPLOYED UNEMPLOYED DISABLED RETIRED

Please specify: _____

Marital Status:

MARRIED WIDOWED SINGLE IN A RELATIONSHIP DIVORCED SEPERATED

How many children? _____

Who do you live with OR lives with you? _____

How do you support yourself? _____

Who do you consider as your emotional support? _____

Are you Currently using any illicit drugs? NO

ALCOHOL COCAINE MARIJUANA HEROIN OTHER _____

If yes, please specify the quantity, frequency and how long you have been on. (ex: 5-6 beers, daily, for 20 years) _____

Have you in the Past used any illicit drugs or abused alcohol? NO

If yes, please specify: _____

Have you served in the military? No

Yes: _____ Years Served: _____ Type of discharged: _____

Who in your family has mental illness, suicide (attempted or completed), or substance abuse?

Please Specify:

Your Medical/Mental Health Diagnoses:

Any arrests or incarcerations? When and Why.

Currently on probation or parole? If yes, specify the duration for probation or parole.

Psychiatric admissions? Please specify Last admission/how many:

Past suicide attempts? When, how many and reason for attempts:

Past/Currently seen a psychiatrist or therapist? When and where.

Current or past treatment for substance abuse? In or Out patient detox / rehab:
