

Patti Bear, Licensed Professional Counselor

1442 Pearl Street, Unit A, Eugene, OR 97401

pattibearlpc.com

541-357-7468

Intake Questionnaire – Adult
(age 14 and older)

Name:

Date:

Address:

May I send mail?

Phone Number(s):

May I leave messages?

Who do you live with? (names and relationship, please)

Please briefly answer the following questions. I will ask for more detail when we meet, but if you need more room please feel free to use the other side of the page.

Why are you seeking counseling at this time?

What are you hoping a counselor can do for you?

Have you seen a counselor before? If so, who and when?

Please describe your sleep habits:

Please describe your appetite and eating habits:

What do you do for exercise?

What do you do for fun or relaxation?

What medications do you take, if any?

Do you experience chronic pain of any kind, including headaches? If so, please describe: