



Rodgers Christian Counseling

Couples Intake

Name(s) _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ His Cell: _____

Her Cell: _____ Which of these is the best way to reach you? _____

Email Address: Him: _____

Her: _____

Date of Birth (Him): _____ (Her) _____ Married? _____ Anniversary: _____

Previous marriages? Him _____ How Many? _____ Her _____ How Many? _____

Are your parents divorced? Him _____ How old were you? _____ Her _____ How old were you? _____

Do you have any siblings? Him _____ Her _____ If so, how Many? Him _____ Her _____

Where are you in the birth order? Him _____ Her _____

Please give the following information for each person that currently lives in your home, *including yourself*.

Name	Age	Relationship to Self
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please also list any other people in your immediate family who may not be living in your house:

Name	Age	Relationship to Self
_____	_____	_____
_____	_____	_____
_____	_____	_____

Personal and Medical Information:

Are you currently taking any prescription medications? _____ Name of Medication _____

List any past or present medical issues: _____

List any secondary issues, (sleeplessness, panic attacks, phobias) : _____

Date of last physicals: Him: _____ Her: _____

Note any significant events occurring at this time (job loss, death in family, financial trouble): _____

List any emotional issues that are present (anger, anxiety, moodiness) : _____

Have you had thoughts of harming yourself or ending your life ? _____

Family History (please include **yourself** in this and specify **whom** it is in your family):

Alcoholism/Drug Abuse: _____

Depression, Manic/Depression, Schizophrenia: _____

Other mental illness: _____

Emotional, verbal, physical, sexual abuse: _____

Other significant childhood traumas: _____

Back Ground Information:

Do you currently attend church? _____

Which church do you attend ? _____

Occupation? Him _____ Her _____

Have you ever seen a therapist before? _____

Was it helpful and how? _____

How did you hear about Rodgers Christian Counseling? _____

What brings you here today? _____

If yes, please describe (how long ago;
yourself or others; did you have a plan): _____

Are your parents living? Him _____ Her _____