



Do you have any medical conditions that we need to know about? If yes please specify.

How do you cope when you are stressed or things are going wrong?

Are you taking any prescribed medication that we need to know about? Yes  No   
If 'Yes' please give details:

Are you receiving support from any other professional? Yes  No

If 'Yes' please tick the ones which apply:

Psychologist	Nurse
Consultant/Medical Specialist	CPN (Community Psychiatric Nurse)
Counsellor	Psychiatrist
Dietician	Social Worker
Other (please specify)	

Who is there to support you in terms of family or friends?

Do you have a learning difficulty or disability? Yes  No   
If 'Yes' please give details

Is there a reason why you would have a preference for a male or female counsellor?

Please make us aware of any issue that could affect availability e.g. school, work, training etc

Please tell us briefly what issues or feelings are worrying you at the moment that you would like to talk about with the counsellor.