

## PERSONAL INFORMATION FORM

Welcome to Counseling Services! Please fill out the information requested below. All the information on this form will be kept strictly confidential and will be used only to assist us in providing you with the best care. Thank You!

Name: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(Last) (First) (MI) Student ID # \_\_\_\_\_ Date: \_\_\_\_\_

Local Address: \_\_\_\_\_ Permanent Address: \_\_\_\_\_  
(Res Hall or Apt) (Street)  
\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(City) (State) (Zip) (City) (State) (Zip)

Local Phone #: \_\_\_\_\_ Permanent Phone #: \_\_\_\_\_  
Okay to leave message? \_\_\_ No \_\_\_ Yes

Cell Phone # \_\_\_\_\_ Emergency Contact Person: \_\_\_\_\_  
Okay to leave message? \_\_\_ No \_\_\_ Yes

E-mail Address: \_\_\_\_\_ Emergency Contact Phone #: \_\_\_\_\_  
Okay to contact by email? \_\_\_ No \_\_\_ Yes

Gender: M F Ethnicity: \_\_\_\_\_ Birth Date: \_\_\_/\_\_\_/\_\_\_ Age: \_\_\_

Class Year: \_\_\_\_\_ Number of credits this semester: \_\_\_\_\_ Major: \_\_\_\_\_  
\_\_\_ FR  
\_\_\_ SO Are you a transfer student? \_\_\_ No \_\_\_ Yes Minor: \_\_\_\_\_  
\_\_\_ JR Academic Advisor: \_\_\_\_\_ Grade Point Average: \_\_\_\_\_  
\_\_\_ SR  
\_\_\_ Other

Do you have any medical conditions? \_\_\_ No \_\_\_ Yes Have you ever received personal counseling elsewhere?  
(If Yes, please list) \_\_\_\_\_ \_\_\_ No  
\_\_\_\_\_ \_\_\_ Yes (If yes, please give date) \_\_\_\_\_

Are you currently taking any medications? \_\_\_ No \_\_\_ Yes Have you ever utilized our services before?  
(If Yes, please list) \_\_\_\_\_ \_\_\_ No  
\_\_\_\_\_ \_\_\_ Yes (If yes, please give date) \_\_\_\_\_

Who referred you to Counseling Services? \_\_\_ Self \_\_\_ Faculty \_\_\_ Staff \_\_\_ Friend \_\_\_ Parent \_\_\_ Other

Name of staff/faculty referring: \_\_\_\_\_

Please indicate the reason for coming to Counseling Services. Describe below in a sentence or two the **main issue or problem** which brought you in today:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

At this time, how much does this issue trouble you? (Circle the number that best represents your present feelings)

- 1.) Hardly at all      2.) Mildly      3.) Moderately      4.) Severely