

FORM 3 : CLIENT PRE-INTERVIEW INFORMATION SHEET

CLIENT PRE-INTERVIEW INFORMATION SHEET (modified to include questions – not space for answers)

Today's Date: ___ / ___ / ___

Client Details :

Name :

Address:

Client mobile:

Client e-mail:

1. FAMILY HISTORY

Outline your relationship with your parents and siblings and where you grew up.

2. RELATIONSHIP HISTORY

Outline your history of significant relationships , especially if children are involved

3. EDUCATION HISTORY

Outline the primary and secondary schools you attended, what school Years for each school and your achievements at school. Outline post-secondary education programmes Courses completed.

4. VOCATIONAL HISTORY

Outline the jobs you have had since leaving school (with approximate dates) , and the reasons you had (if any) for leaving those jobs.

5. HEALTH HISTORY

Outline your history of health problems since childhood. Also include whether you see a regular GP or Medical Practice and the details of this.

6. MENTAL HEALTH HISTORY

Outline your history of mental health problems since childhood. Also include whether you see a regular therapist and the details of this.

7. SUBSTANCE USE HISTORY

Outline any history of alcohol and other substance use.

8. GAMBLING HISTORY

Outline any history of gambling and whether you consider it a problem.

9. CRIMINAL & DISCIPLINARY HISTORY.

Detail any prior history of offending (e.g. drink driving) and the outcome. Also indicate from your history in the workforce any instances where you have been subject to disciplinary measures.

I DECLARE THAT TO THE BEST OF MY KNOWLEDGE THE INFORMATION I HAVE PROVIDED IS TRUE & ACCURATE, AND I HAVE NOT ATTEMPTED TO CONCEAL ANY INFORMATION.

SIGNED : _____ **DATED:** _____