

## Client Personal Data (spouse)

Today's Date: \_\_\_\_\_

Name \_\_\_\_\_



### Health:

What is your health? Good\_\_\_ Fair\_\_\_ Poor\_\_\_

Last Physical \_\_\_\_\_

What medications are you taking?  
\_\_\_\_\_

Have you now or in the last 5 years suffered from?

Nervous breakdown\_\_\_

Panic attacks\_\_\_

Depression \_\_\_

Suicide attempt \_\_\_

Have you or are you now in an abusive situation? Yes\_\_\_ No\_\_\_

Have you experienced sexual abuse? Yes\_\_\_ No\_\_\_

Do you have a STD? Yes\_\_\_\_\_ No\_\_\_\_\_

### If applies:

Are you pregnant? Yes\_\_\_ No\_\_\_

How many if any miscarriages have you experienced? \_\_\_\_\_

Have you had an abortion? Yes\_\_\_ No\_\_\_

If yes: how many\_\_\_\_\_ what age were you? \_\_\_\_\_

Have you given up a child to adoption? Yes\_\_\_ No\_\_\_

If yes: how many? \_\_\_\_\_ When? \_\_\_\_\_

Do you have contact? Yes\_\_\_ No\_\_\_\_\_

### Hobbies

What are your hobbies? \_\_\_\_\_

What do you do for fun? \_\_\_\_\_

**Childhood Information**

What birth order are you in your family? Oldest Middle Youngest  
 How many siblings do you have? \_\_\_\_\_

**Parent Information**

Are your parents divorced? Yes \_\_\_\_ No \_\_\_\_ If yes, how long \_\_\_\_\_  
 Do you interact with them? Yes \_\_\_\_ No \_\_\_\_

**Alcohol / Drug History**

**YES NO MAYBE**

- |   |     |     |     |
|---|-----|-----|-----|
| 1. Do you drink alcoholic beverages?  | ___ | ___ | ___ |
| 2. Have you or a family member ever been concerned about your alcohol usage?    | ___ | ___ | ___ |
| 3. Does or has your mother or father had an alcohol / drug problem? M ___ F ___ | ___ | ___ | ___ |
| 4. Do you have a history of drug abuse?   | ___ | ___ | ___ |
| 5. Have you or a family member ever been concerned about your drug usage?       | ___ | ___ | ___ |
| 6. Do you smoke cigarettes?   | ___ | ___ | ___ |

**Church**

What is your church background? \_\_\_\_\_

Do you attend church now? \_\_\_\_\_ How often? \_\_\_\_\_

Name of current church \_\_\_\_\_

If yes: Are you involved in any ministries? \_\_\_\_\_