



Diana Marinaro, LCSW
Psychotherapist

Date:

Name:

Address:

Phone:

Email address:

Date of Birth:

Age:

Emergency Contact:

Emergency Contact Phone:

What is your romantic relationship status?

Who lives in your home?

What is their name, age, and relationship to you?

EMPLOYMENT AND EDUCATIONAL HISTORY

Are you currently employed?

If yes: number of hours per week:

Type of work you do or previously have done:

What is your highest completed education?

HEALTH HISTORY

Do you have any health conditions?

Please list your medications, including anti-depressant and/or anti anxiety and dosage:

Are you in chronic physical pain and/or recovered from a serious illness or accident?

Do you drink alcohol? If yes, quantity and days per week/month?

Do you use drugs? If yes, quantity and days per week/month?

Are you in recovery from drug/alcohol dependence? Years sober:

Have you been to therapy before? If yes, please list approximate dates.

Have you ever been hospitalized for a psychiatric illness? If yes, year & length of hospitalization

Has anything traumatic ever happened to you?

FAMILY HISTORY

Were you raised by your biological parents?

Are your parents alive? If yes, what are their ages?

Were both of your biological parents present and living together in the household during your whole childhood?

Do you have any siblings? Please list all with ages:

Do you have family members with alcoholism, drug addiction, or mental illness?

SOCIAL/SPIRITUAL HISTORY

Do you identify with any particular religion and/or do you consider yourself to be spiritual?

Do you have any particular hobby or activity that you enjoy?

Do you feel that you have a good enough group of supportive friends or family?

What are your greatest strengths?

Do you feel that you are using your strengths, skills and talents in your work or daily life?

What do you do for fun?

If we were to work together, and you looked back on our work; please list some things you would have liked to have accomplished – such as less symptoms of depression/anxiety, relationship(s) improvement, overall general happiness with yourself and in your life, etc: