

Personal Data Inventory

Date: _____

Name: _____ Age: _____ Sex: _____

Address: _____ City: _____ St: _____ Zip: _____

Phone: _____ Marital Status: _____ Occupation: _____

Referred to us by: _____

Health Information:

Height: _____ Weight: _____ How would you rate your health? _____

Date of Last Physical Exam: _____ Physician's Name: _____

Physician's Address: _____

Are you presently taking medication? Yes No; If yes, what? _____

Have you ever felt you had a drinking problem or abused drugs? Yes No

If yes, what and when? _____

List what you would consider your worst emotional upset: _____

Any other emotional crises (use back of sheet if needed): _____

Have you ever been diagnosed as having any kind of psychiatric condition? (clinical depression, anxiety disorder, bipolar disorder, etc.)

Yes No; If yes, what: _____

If needed, would you be willing to sign a Release of Information form so that we could discuss your case with your therapist or psychiatrist? Yes No. Explain: _____

Briefly, what is your basic problem as you see it? _____

How long have you had this difficulty? _____ How did it start? _____

Were others involved? Yes No; Would you be willing to identify them? _____

Have you sought help before? Yes No; If so, from whom? _____

Marriage and Family History:

Father:

Age: _____ Currently living? Yes No; If not, when and how deceased? _____

Occupation: _____ Ethnic Heritage: _____ Religion? _____

Any known occult affiliations (Masonry, spiritism, Rosicrucians, etc.): Yes No

How would you describe your relationship with him: Excellent, Good, Fair, Distant, Abusive. Remarks? _____

Mother:

Age: _____ Currently living? Yes No; If not, when and how deceased? _____

Occupation: _____ Ethnic Heritage: _____ Religion? _____

Any known occult affiliations (Masonry, spiritism, Rosicrucians, etc.): Yes No

How would you describe your relationship with her: Excellent, Good, Fair, Distant, Abusive. Remarks? _____

Any alcoholism or drug abuse in your family of origin? Yes No; (If yes, who and what?) _____

How many children in your family? _____ Which child were you by number? _____

Did anyone else have a key role in your upbringing? Yes No; If so, who? _____

Why? _____

Have you ever cursed your parents (told them to go to hell, damned them, etc.)? Yes No

At what age were you married? _____ Your spouse's age at marriage? _____

Have you ever been married before? Yes No; If yes, how many times? _____

Your spouse's current age: _____ His/her occupation: _____

His/her ethnic heritage: _____ Religious background: _____

Any present or past occult affiliations? _____

Would you consider your spouse to have any drinking or drug problems? _____

How many children by this marriage? _____ List them:
Name: _____ Sex: _____ Age: _____

Name: _____ Sex: _____ Age: _____

Name: _____ Sex: _____ Age: _____

How many children living at home now?

Any children by previous marriages? Yes No; List them:
Name: _____ Sex: _____ Age: _____

Name: _____ Sex: _____ Age: _____

Name: _____ Sex: _____ Age: _____

Any abortions or miscarriages? Yes No; List by dates: _____

Spiritual Information:

Denomination (if any): _____ Are you saved? Yes No; How long? _____

Do you consider yourself to be Spirit-filled? Yes No; How long? _____

Has your BASIC problem occurred in any of your ancestry? _____

Please note if you are a victim of abuse: sexual; physical; emotional; ritual.

Please indicate VOLUNTARY involvement in any of the following activities:

Abortion

Adultery

Astral Projection

Astrology

Blood Pacts

Channeling

Clairvoyance

Divination

Dungeons & Dragons

Eckankar

EST (The Forum)

Fortune Telling

Heavy Metal Rock

Homosexuality

Hypnotism

Incubi or Succubi (sexual spir-
its)

I.U.D. (women only)

Levitation (or table-tipping)

Masturbation

New Age

Occultism

Ouija Board

Pacts with Satan

Palm Reading

Pornography

Pre-marital sex

Psychic Healing or Surgery

Rosicrucians

Sado-Masochism

Satanism

Séances

Silva Mind Control

Swedenborgianism

Tarot Cards

Telepathy

UFO Contacts

Voodoo (or Santeria, etc.)

Witchcraft

White or Black Magic

Please Indicate VOLUNTARY INVOLVEMENT in any of the following churches or sects:

- | | | |
|---|--|---|
| Anthroposophy (<i>Rudolph Steiner</i>) <input type="checkbox"/> | I AM Movement <input type="checkbox"/> | Roy Masters <input type="checkbox"/> |
| Bahai <input type="checkbox"/> | Islam <input type="checkbox"/> | Scientology (<i>Dianetics</i>) <input type="checkbox"/> |
| Black Muslims <input type="checkbox"/> | Jehovah's Witnesses <input type="checkbox"/> | Shrine <input type="checkbox"/> |
| Buddhism <input type="checkbox"/> | Job's Daughters <input type="checkbox"/> | Spiritualism <input type="checkbox"/> |
| Christian Science <input type="checkbox"/> | Liberal Catholic Church <input type="checkbox"/> | Unification Church (<i>Moonies</i>) <input type="checkbox"/> |
| Church Universal and Triumphant (<i>Summit Lighthouse</i>) <input type="checkbox"/> | Liberal Theology <input type="checkbox"/> | United Pentecostal Church (<i>Jesus Only</i>) <input type="checkbox"/> |
| DeMolay <input type="checkbox"/> | Lodges (<i>misc. — Odd Fellows, etc.</i>) <input type="checkbox"/> | Unity School of Christianity <input type="checkbox"/> |
| Eastern Star <input type="checkbox"/> | Mormonism <input type="checkbox"/> | Wicca <input type="checkbox"/> |
| Freemasonry <input type="checkbox"/> | Neo-Paganism <input type="checkbox"/> | Way International <input type="checkbox"/> |
| Grange <input type="checkbox"/> | Rainbow Girls <input type="checkbox"/> | World-Wide Church of God (<i>Herbert W. Armstrong's</i>) <input type="checkbox"/> |
| Hari Krishnas (ISKCON) <input type="checkbox"/> | Rastafarians <input type="checkbox"/> | Other cults (_____) |
| Hinduism <input type="checkbox"/> | RLDS Church <input type="checkbox"/> | |
| | Roman Catholicism <input type="checkbox"/> | |

Special Note to the Counselee:

All the information given here and during the actual prayer session is confidential; and will be held in the strictest professional confidence—except in cases where the client is a danger to himself or others or the laws of civil authorities are at issue (Rom. 13:1-2).

We are delighted to be able to minister to you. While we do not charge for our counseling services as such, we would like to remind you that we are a faith ministry and exist entirely on donations and offerings. The laborer is worthy of his hire (Luke 10:7)

Most counselors with equivalent training charge around \$90 an hour for counseling. We request that you pray about making a donation as close to this amount as possible. Your commitment will enable us to continue serving those in need. If you cannot afford any money, then that is fine too. Just pray for us!

I am freely applying for this ministry. I have not been pressured or coerced into this activity by my counselor(s), pastor, or any one else. Rather I am acting in the liberty which is mine in Christ Jesus, and only want Him to set me free.

Date: _____ Counselee: _____