PRESENTING CONCERN
Describe the client’s concern(s):
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

SOCIAL/BACKGROUND HISTORY
Family relationships (how does the client relate with other family members and what role might they play in this concern?):
________________________________________________________________________
________________________________________________________________________

Dating/marital relationship including sexual history as appropriate (what role might this play in the client's concern?):
________________________________________________________________________
________________________________________________________________________

Educational/vocational history (grades, job performance, etc.; and what role might these play in this concern?):
________________________________________________________________________
________________________________________________________________________

CLIENT(S) ASSETS/STRENGTHS
Personal goals (what does the client want to accomplish in the future?):
________________________________________________________________________
________________________________________________________________________

Strengths (what does the client perceive as positive attributes, skills, etc.?):
________________________________________________________________________
________________________________________________________________________

Preferred activities (hobbies, things the client enjoys doing):
________________________________________________________________________
________________________________________________________________________
INTAKE INTERVIEW REPORT FORM, CONTINUED

EXPECTATIONS OF COUNSELING
What does the client want to gain as a result of counseling?

BEHAVIORAL OBSERVATIONS
Including appearance, mannerisms, mood/emotional state, attitude:

Counselor’s analysis of presenting concern, diagnostic impressions, and recommended treatment plan:

DSM-IV Diagnostic Impression (For CMHC Students Only):
Axis I: ____________________________  Axis IV: ____________________________
Axis II: ____________________________  Axis V: ____________________________
Axis III: ____________________________
Prognosis: ____________________________

Recommended Lab Assignment:
Individual: ____________________________  Group: ____________________________

Intake Counselor’s Signature ____________________________  Date

Supervisor’s Signature ____________________________  Date

Counselor: ____________________________  Client #: ____________________________

Revised: RAH, August 2012