

Consultation: Consultee Information Form

Date: _____ Name: _____ DOB: _____

Full Address: _____

May I send correspondence here? _____ Email address: _____

Home phone _____ Work/cell phone _____ May I leave a message? _____

Emergency Contact (Name, Phone#, Relationship): _____

Occupation: _____ Employer/Self-Employed: _____

Referred by: _____ May I thank them? _____

What cell phone number can I use to send you the IvyPay link for payment for sessions? _____

This form is for information-gathering only. Your answers will be kept confidential. You will not be judged or diagnosed by your answers, nor expected to maintain the status quo. Feel free to add any other information you think might be useful / use the back.

Describe briefly what motivates you to seek consultation at this time.

What are your goals for consultation and how will you know if it is helping?

What have been your previous experiences in supervision/consultation? What worked well for you and what did not work well for you?

What are your hopes about what you will gain in consultation?

What are your fears about consultation?

Describe your work – populations served, specialties, setting, specific challenges, and sources of stress.

Describe your theoretical orientation, training background, and areas where you wish to gain more knowledge.

What are your long-term professional goals?

Please describe the strategies you use most often for coping with stress.

How familiar are you with the concepts of compassion fatigue, compassion satisfaction, burn-out, and vicarious trauma?
Are you interested in exploring and learning more about the secondary impact of your work?

Please describe briefly your spiritual practices/beliefs, if any, and how you feel they support and/or challenge you in your work. Are you open to discussing this in the context of your work?

How is your physical health? How do you feel about your sleeping, eating, and movement practices?

Do you have any goals related to your career and professional development? Building a private practice? If so, briefly describe here and let me know if you would like this to be one focus for our work together. What kind of support would be most useful to you with this goals?

Describe your support system.

What do you do for fun?

What else should I know about you at this time?

Thank you for sharing this information. It will be held in confidence.