

Account # \_\_\_\_\_

Dx \_\_\_\_\_

**Marilyn Wolf, M.Ed., LPC, LCAS**  
**Brassfield Center for Psychotherapy & Personal Development**  
**2012 New Garden Road, Suite E**  
**Greensboro NC 27410**  
**Phone: 336-288-0588 / Fax: 336-288-0517**  
**www.brassfieldpsychotherapy.com**

**CONFIDENTIAL CLIENT INFORMATION FORM**

Date \_\_\_\_\_ Soc. Sec. \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_  
Last First M.I. Birthdate \_\_\_\_\_

Home Address \_\_\_\_\_  
\_\_\_\_\_

Employment \_\_\_\_\_

Telephone Home: \_\_\_\_\_ Work: \_\_\_\_\_ Mobile: \_\_\_\_\_

Marital/Partnership Status: Single Divorced Widowed Married Partnered

Name of Spouse/Partner \_\_\_\_\_

Names and Ages of Children \_\_\_\_\_

Religious Affiliation/Spiritual Beliefs \_\_\_\_\_

Is this something you'd like to be a part of our work together? \_\_\_\_\_

Are you a veteran of any war? \_\_\_\_\_ If so, which and dates of service: \_\_\_\_\_

How did you learn of me and my services? \_\_\_\_\_ Friend \_\_\_\_\_ Another Therapist \_\_\_\_\_ Insurance Company

\_\_\_\_\_ Phone Book - Yellow Pages \_\_\_\_\_ YellowPages.com \_\_\_\_\_ Brassfield Psychotherapy website

\_\_\_\_\_ Triad Medical Guide \_\_\_\_\_ Guilford Woman magazine \_\_\_\_\_ LPCANC website Referral Directory

\_\_\_\_\_ Other: \_\_\_\_\_

If you were referred by someone I know, may I have his/her name and your permission to thank them? Yes No

Name: \_\_\_\_\_

Have you ever seen a psychotherapist/counselor before? Yes No

Optional: If yes, please list date(s) and the name(s) of the therapist(s): \_\_\_\_\_

\_\_\_\_\_

Would you like for me to speak with your prior therapist(s)/counselor(s)? Yes No

Have you ever been hospitalized for psychiatric/addiction treatment? If yes, please state when, where, and what you were treated for: \_\_\_\_\_

Please list any medications you are currently taking: \_\_\_\_\_

\_\_\_\_\_

Please describe why you are seeking counseling/psychotherapy at this time: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is there anything else that you would like for me to know about you at this time? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How to reach you: To protect your confidentiality, please answer the following questions regarding my leaving messages for you.

1) May I leave messages for you at HOME?

On an answering machine? Yes No With other people? Yes No

2) May I leave messages for you at WORK?

On an answering machine? Yes No With other people? Yes No

3) May I leave messages for you on your CELL PHONE? Yes No

Any other information you would like me to have regarding leaving messages for you? \_\_\_\_\_

\_\_\_\_\_

Thank you!  
Marilyn Wolf