

OUTLINE FOR PERSONAL HISTORY

PRESENTING PROBLEMS, SYMPTOMS, AND TREATMENT GOALS

Why are you coming to therapy? Why now?

What are your symptoms?

What negative self-beliefs are associated with your problem?

What experiences in the past do you think are linked to your symptoms?

What have you done to try to remedy the problem? _____

What are your goals for therapy? _____

DEVELOPMENTAL HISTORY

Birth and early infancy _____

Schoolchild and adolescence (social and sexual development)

Trauma history (if any) _____

Abuse history (if any) _____

History of medical problems and procedures _____

History of mental health treatment _____

Medications _____

History of substance abuse _____

Significant events in your adult life _____

What are your resources and strengths ? _____

Diet and exercise (please comment) _____

Spirituality – what role does it play in your life?
