

GENDER CENTRE COUNSELLING INTAKE FORM

Date _____

Client reference number _____

Surname _____ **Given Name** _____

Address _____

Suburb _____

State; _____ postcode; _____ ph; _____

Email; _____

Gender (please state the gender that best describes you) _____

Date of birth _____ Country of birth _____

Australian resident _____ How long have you lived in Australia _____

Have you used this service before Yes No If Yes, When _____

Emergency Contact

In the case of an emergency, who would we notify?

Name _____

Address _____

Relationship to you _____ Ph. _____

Physical History

General health _____

Are you under a doctor's care? _____ Name of GP _____

What is the reason for the doctor's care?

Are you taking any medication? _____ If yes, what kind? _____

What is the reason for medication? _____

Any recent major illnesses, surgeries or chronic conditions?



Mental Health History

Have you ever been hospitalized for a mental illness? Yes No

Why were you admitted? _____

Have you ever been diagnosed with a mental illness? Yes No

If yes, what was the diagnosis? _____

Do you have an addiction? Yes No Uncertain

If yes, what type of addiction? _____

Do you take recreational drugs? Yes No

If yes what kind? _____

Do you drink? Yes No

If yes how often and in what quantity? _____

Have you made any past attempts of suicide? Yes No

If yes provide details _____

Do you have any thoughts of suicide now? Yes No

Past Counselling

Have you had any counselling in the past? Yes No

If yes please describe:

When? _____ Where? _____ For how long? _____

Why? _____

Why have you decided to come for counselling at The Gender Centre?

What would you like to experience that is different from what you are experiencing now?

What would you like to work on in therapy? _____

Please continue to next page

GENDER CENTRE COUNSELING CONTRACT



Appointment Bookings

You have been offered an initial appointment for counselling. Following this, you can book up to **four** future appointments if you choose. Each time you attend, you can book an extra session, keeping the future bookings at **four**.

What if I cannot attend?

If you cannot attend an appointment, please phone or email the counsellor and inform them of the cancellation with as much notice as possible.

Please **do not attend the Centre if you are sick**, we are a small team and are greatly affected if illness is transmitted through the service.

If you fail to attend an appointment **without** giving the Centre at least **twenty four hours'** notice, we will have to terminate the counselling contract, as there is a long waiting list and the center needs time to rebook unused appointments with clients on the waiting list.

Confidentiality

The counsellors keep all notes secure in locked computer files. The information you share is kept confidential except in the following circumstances:

- Your counsellor may seek supervision with regard to your situation, as is a requirement for counsellors in NSW. In these cases, your personal details are not disclosed, and the supervisor holds the same level of confidentiality as your counsellor
- If you share information about a serious crime that has been, or is going to be committed, your counsellor will need to notify the police
- If your counsellor feels you are at risk of harm to yourself, or that you are a risk to another person, they will seek support for you through external means
- If your counsellor learns that a child is at serious risk of harm or neglect, they will contact Community Services (as is required by law)

In each of these cases, your counsellor will endeavour, where possible, to talk with you about the need to breach confidentiality.

If you have any questions about this document, please ask your counsellor or another member of staff at the Gender Centre.

Signed: _____

Date: _____

Name: _____