



## Situation History Form

NOTE: Each individual being counseled must complete the following form prior to first counseling session. Answers must be as complete as possible. All information will be kept as confidential as the laws of the State of Indiana allow.

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Print

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

This form will give your counselor(s) an overall picture of the situation or problem you are facing so that your counselor(s) can adequately prepare for your first discipleship session. Please try to answer each question succinctly in the space provided. You may use the back side of the form if necessary but please identify additional remarks with an arrow on this side of the form and the appropriate question number on the back.

#1 - What is the main problem as you see it? What is it that brings you to New Path for counseling?

#2 - What have you previously done or tried in an attempt to resolve or fix the problem? Please be specific.

#3 - What do you want us to do for you? What are your expectations in coming to us for help?

#4 - How would you describe yourself? Briefly tell us what kind of a person you are. What are you like?

#5 - If there is another person involved in this problem how would you describe that person? What are they like?

#6 - Is there any other pertinent information that you think might be helpful to our understanding of your problem and situation?