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Welcome! Before your first session, print this form and take a few minutes to answer the following questions. Please do your best to be honest as you respond. I look forward to meeting you!

Name \_\_\_\_\_

1. Who in your life is most supportive (perhaps a pastor, friend, or family member):

\_\_\_\_\_  
\_\_\_\_\_

2. Have you ever been hospitalized for mental health reasons?

\_\_\_\_\_

3. Are you currently using any medications? \_\_\_\_\_

\_\_\_\_\_

4. Are drugs or alcohol involved in your life or the life of someone close to you?

\_\_\_\_\_  
\_\_\_\_\_

5. Are you or someone you care for in danger of being harmed? Yes No Please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

6. What are your goals? What do you hope is accomplished as a result of our work together? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

7. Anything else you would like me to be aware of at this time?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Thank you for taking time to reflect and respond to these questions. I look forward to meeting with you!