**Single Session Chairwork (SSC) Intake Form**

This intake form is an opportunity for your and your therapist to prepare for your single session. Please complete and return it to info@chairwork.co.uk within seven days of your appointment.

|  |
| --- |
| Name: |

|  |
| --- |
| Gender: |

|  |
| --- |
| Date of birth: |

|  |
| --- |
| Address: |

|  |
| --- |
| GP Surgery:  |

|  |
| --- |
| Profession: |

|  |
| --- |
| Email Address: |

|  |
| --- |
| Telephone Number: |

|  |
| --- |
| Preferred method contact: EMAIL / TELEPHONE |

|  |
| --- |
| Have you ever participated in a single session intervention before? YES / NO |

|  |
| --- |
| What is the one problem or concern that you would like to focus on in your single session?[*PLEASE SUMMARISE*] |

|  |
| --- |
| How does this issue affect you?[*PLEASE SUMMARISE*] |

|  |
| --- |
| How does this issue affect other people in your life?[*PLEASE SUMMARISE*] |

|  |
| --- |
| What is important for me to know about the background of this problem? [*PLEASE SUMMARISE*] |

|  |
| --- |
| How have you attempted to address this issue in the past? What has and has not helped? [*PLEASE SUMMARISE*] |

|  |
| --- |
| If the session could help you take one step towards addressing this issue, what would you want that to be?[*PLEASE SUMMARISE*] |

|  |
| --- |
| If the session was successful in achieving the above, what would have changed? [*PLEASE SUMMARISE*] |

|  |
| --- |
| What strengths or personal resources can you bring to addressing this issue? *(If you’re unsure, think about what the people who know you really well would say in response to this question about you).* [*PLEASE SUMMARISE*] |

|  |
| --- |
| Is there anything else you would feel is important to share before your appointment? *E.g. about your background, culture, ethnicity, sexual orientation, gender identity, mental health, physical health, or other?*[*PLEASE SUMMARISE*] |

|  |
| --- |
| Have you ever participated in chairwork or role-play before? YES / NO |

|  |
| --- |
| Is there a particular dialogue you feel would be helpful? E.g. With a particular person, part of yourself, or something else?[*PLEASE SUMMARISE*] |

|  |
| --- |
| Have you read the Single Session Chairwork Information Sheet? YES / NO |

|  |
| --- |
| Have you read and signed the Terms and Conditions form? YES / NO |