

If you have already had counselling for this problem, please mention the name of the counsellor and describe the outcome:

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.....

Have you addressed this problem with anybody else?

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.....

Please choose from the list any term relating to your problem:

- | | | |
|----------------------------|----------------------------------|---------------------------|
| headache | depression | shyness |
| dizziness | alcoholism | loneliness |
| fainting fits | taking of tranquilizers | tenseness |
| pounding heart/heart spasm | restlessness | bad conditions at home |
| stomach problems | sexual problems | financial problems |
| lack of appetite | inability to feel joy | hearing sounds and voices |
| digestive problems | can't stand weekends or holidays | panic attacks |
| fatigue | overambitious | trembling |
| exhaustion | unable to keep a job | thoughts about suicide |
| sleeplessness | unable to make friends | inferiority complex |
| nightmares | unable to make decisions | drugs |

Date and place of birth:

Were you welcomed/desired as a child?

Was your mother's pregnancy/was the birth normal?

How often did you move?

Please choose any term that applies to your childhood:

- | | | |
|---------------|-------------|-----------------------|
| nightmares | Nail biting | Happy childhood |
| bed wetting | stuttering | Unhappy childhood |
| sleepwalking | anxieties | Happy youth |
| thumb sucking | escaping | Unhappy youth |
| | | No childhood memories |

Children's diseases:

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Illnesses during youth/adulthood:

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.....

Accidents, operations, prolonged hospital stays (at which ages)?

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.....

Height:cm

Weight:.....kg

Please, list all types of medicine/vitamins you are taking at the moment:

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.....

When did you last feel well, physically as well as emotionally, over a decent period of time?

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.....
.....

How do you spend your free time?

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.....

Training/university education (completed when):

.....
.....

Relationship with schoolmates:

.....

I was good at school in/I was not good at school in:

.....
.....

Have you ever had a nickname? Explain briefly:

.....

Are you satisfied with your present occupation? If not, what is the reason for your dissatisfaction?

.....

What is your financial situation like?.....

Goals and aspirations for your life:

.....
.....
.....

Questions concerning sexuality:

What was your parents' attitude towards sexuality (e. g.: how did they explain sex? how did they talk about sex?)

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.....

When and how did you acquire your first knowledge about sex?

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.....

When did you first become aware of your sexual impulses?

.....

Have you ever struggled with anxieties, guilty or trauma deriving from masturbation? If so, please explain:

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.....

Have you ever struggled with anxieties, guilty or trauma deriving from sexual experiences with the other sex?
If so, please explain:

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.....

Have you ever struggled with anxieties, guilty or trauma deriving from sexual experiences with the same sex?
If so, please explain:

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.....

Family data:

Please, list all siblings - including yourself - starting with the eldest. As far as you know, include miscarriages/abortions as well.

Name	Gender	Age	Marital Status	Occupation	Character
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What was/is your relationship with your siblings like?
In the past:

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.....

Today:

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.....

With “Father” we mean the man who held the main responsibility for your upbringing. If it was not your biological father, please, describe anything you know about your biological father on the back of this page (extra sheet). On this side, please describe the father who brought you up...

Father’s Name Birth Date:

Occupation Health: good average bad

If deceased, cause and age of death

Faith: not a believer traditional Christ practicing Christianity Other:

Character:

.....
.....

His ambitions for his children:

.....
.....

His relationship with his children:

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.....

His relationship with your mother (his wife):

.....
.....

His favourite child (explain, please):

.....
.....

Which child resembles your father the most? How so?

.....
.....

Which child resembled the father the least? How so?

.....
.....

What was it that you, as a child liked about your father?

.....
.....

What did you, as a child, dislike about your father?

.....
.....

With “Mother” we mean the woman who held the main responsibility for your upbringing. If it was not your biological mother, please, describe anything you know about your biological mother on the back of this page (extra sheet). On this side, please describe the mother who brought you up...

Mother’s Name Birth Date:

Occupation Health: good average bad

If deceased, cause and age of death

Faith: : not a believer traditional Christian practicing Christianity Other:

Character:

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Her ambitions for her children:

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Her relationship with her children:

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.....

Her relationship with your father (her husband):

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Her favourite child (explain, please):

.....
.....

Which child resembles your mother the most? How so?

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.....

Which child resembled the mother the least? How so?

.....
.....

What was it that you, as a child liked about your mother?

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.....

What did you, as a child, dislike about your mother?

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.....

How did your parents discipline you?

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Please, share about/give an impression of the atmosphere in your childhood home:

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Could you trust your parents?

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In case you were not brought up by your parents, who was it that brought you up?

Over which period of time?

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If you were brought up by your parents, was there another “parental” figure/person?

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Has anybody everone (parents, relatives, friends) intruded into your marriage, your job, etc...?

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Does any of your family members suffer from alcoholism, drug addiction or something else that could be defined as an emotional/psychological illness/disturbance:

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Are there other family members who’s diseases could present us with valuable information?

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Complete the following sentences:

When I was a child

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For me, school was

.....

My anxieties as a child were

.....

My dreams/desires as a child were

.....

My role among my friends was

.....

The most important occurrences/incidents during my physical and sexual development were

.....

The most important occurrences/incidents during my social development were

.....

The most important values in my family were

.....

The thing that stands out most in my family life is...

.....

The relationship between my parents was

.....

Please list other occurrences/memories which have not been mentioned in the questions so far, but which are meaningful for you:

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Marriage:

Your spouse's first name: Birth Date:

Occupation:

How long did you know your spouse before getting engaged?

For how long were you engaged? How long have you been married?

About your marriage:

What was it that you liked about your spouse during the first years of marriage?

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What was it that your spouse liked about you during the first years of marriage?

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What was it that you disliked about your spouse during the first years of marriage?

.....
.....

What was it that your spouse disliked about you during the first years of marriage?

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.....

What did you like about your spouse over the last years of your marriage?

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What did your spouse like about you over the last years of your marriage?

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.....

What did you dislike about your spouse over the last years of your marriage?

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.....
.....

What did your spouse dislike about you over the last years of your marriage?

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.....
.....

List the names of your children. Please, also mention any children from former marriages or any adopted children. If there were abortions or miscarriages, please list them as well.

Name	Gender	Age	Marital Status	Occupation	Character
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Former marriages:

Names of former spouses: Birth Date:

When were you first married? For how long?

What did you like about your former spouse, what did you dislike about him/her?
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What did your former partner like/dislike about you?
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Why did your relationship come to an end?
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Thank you very much!

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Or upload it online: https://elijahhouse.at/en/misc_data/uploads/**