



Family Psychiatric History:

Educational History (include grade in school, history of psychoeducational testing, special education, failures or difficulties with handwriting, spelling, reading, math, speech, referrals & results):

Drug and Alcohol History (include description of substances you have used, in the past and currently, and any previous treatment for substance dependence or abuse):

Medical History (include chronic or acute illness or physical complaints, immunizations, head injury, loss of consciousness, tics, seizures, snoring, hospitalizations, accidents, medications, allergies):

Your Strengths:

Client's Signature

Date