

The Therapy Center

Initial Contact Form

Boston Graduate School of Psychoanalysis

Therapist Name: _____

Date of Intake: _____ / _____ / _____ (_____) Time _____ AM / PM **T.C Room#** 1 2 3 4 5

Faculty Office: _____ **Classroom#4**

Date The Therapy Center was contacted: _____ (Month) _____ (Day) _____ (Year)

Patient Name: _____
(First) (Last) (Middle Initial)

Address: _____
(Street) (City/Town) (State) (ZIP)

Phone Number: *Best* number to reach patient: (Cell) (Home) (Work) _____
Alternate number: (Cell) (Home) (Work) _____

Email _____

Date of birth: _____ (Month) _____ (Day) _____ (Year)

How was The Therapy Center contacted?

- Phone call / Email
- The Therapy Center Therapist brought their own referral
- Walk in
- Other _____

Contacting for:

- Self
- Child
- Other
- Explain _____

If calling for child, what is the relationship to the child? _____

Where does the child live? _____

Mother/Father/Guardian

Parent Name: _____
(First) (Last) (Middle Initial)

Parent Address: _____
(Street) (City/Town) (State) (ZIP)

Parent/Guardian Phone Number:

Mother/Father/Guardian Best number to reach you at: _____ Cell ___ Home ___ Work _____

Mother/Father/Guardian Alternate number: _____ Cell ___ Home ___ Work _____

Has patient ever been here before?

- Yes When? _____ Name of previous therapist _____
- No
- Unsure

Referred by:

- The Therapy Center existing patient / former patient
- Other friend or family member
- BGSP student / BGSP faculty
- Other BGSP affiliate
- Non-BGSP Professional (e.g. teacher, doctor, chiropractor) Explain _____
- On-line (Google search, Facebook, email, website etc.) _____
- Postcard / Flyer
- Unknown
- Other _____

Special requests (e.g., Spanish speaking therapist, female therapist, etc.) _____

Other information conveyed by patient:

Was patient informed that they must arrive early to complete the intake form?

- Ms. Boutzis / Fellow: Yes / No
- Patient was informed by the Therapist that brings in their own referral Yes / No / Unsure

Who is giving the intake form to the patient?

- Ms. Boutzis
- Door monitor
- Fellow
- Self (picked up form from the lobby desk)
- Other _____

