



R. W. (Bill) Buck, Jr., MEd, LPC, NCC, BCPCC - Relationship Counselor

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Personal Questionnaire

Name: _____ Age: ____ Birth Date: _____

Reason for seeking counseling (use the back or separate sheet if more room is needed):

Referred by: _____ Referral's telephone number: _____

Have you ever been in counseling before? []Yes []No If yes, please share the reason:

Client's personal data:

Street address: _____

City: _____ State: _____ Zip Code: _____

Telephone numbers (home): _____ (work) _____ (other) _____

Church affiliation: _____ Marital status: _____

Occupation: _____

Business address: _____

Education - Highest grade completed: ____ GED?[]Yes []No - Technical school ____ years

College ____ years - Degree: _____

Other special training: _____

Relationship and age of others living at your address:

Medications you are now taking that may influence your emotions or thinking: _____

Family physician: _____ Phone number: _____

Address: _____

Person responsible for paying fees: _____

Telephone numbers (home): _____ (work) _____ (other) _____

Full address: _____

(Please continue on the back.)

Personal Evaluation Checklist

Rate each item by circling from 1, disagree completely, to 10, agree completely.

- I have feelings of low self-esteem:.. 1 2 3 4 5 6 7 8 9 10
- I have difficulty with giving intimacy:.. 1 2 3 4 5 6 7 8 9 10
- I have difficulty with receiving intimacy:.. 1 2 3 4 5 6 7 8 9 10
- I feel like staying isolated from others:.. 1 2 3 4 5 6 7 8 9 10
- I operate as a perfectionist:.. 1 2 3 4 5 6 7 8 9 10
- I operate as a caretaker:.. 1 2 3 4 5 6 7 8 9 10
- I operate as a controller:.. 1 2 3 4 5 6 7 8 9 10
- I operate as a gossip:.. 1 2 3 4 5 6 7 8 9 10
- I operate in a contemptuous way:.. 1 2 3 4 5 6 7 8 9 10
- I need the approval of others to feel good about myself:.. . . . 1 2 3 4 5 6 7 8 9 10
- I give extreme loyalty to others when undeserved:.. 1 2 3 4 5 6 7 8 9 10
- I am easily intimidated by angry people:.. 1 2 3 4 5 6 7 8 9 10
- I am easily intimidated by people in authority:.. 1 2 3 4 5 6 7 8 9 10
- I have relationships with psychologically unhealthy people:.. . . 1 2 3 4 5 6 7 8 9 10
- I feel like a victim:.. 1 2 3 4 5 6 7 8 9 10
- I like to be around people who seem to be victims:.. 1 2 3 4 5 6 7 8 9 10
- I am super-responsible:.. 1 2 3 4 5 6 7 8 9 10
- I am super-irresponsible:.. 1 2 3 4 5 6 7 8 9 10
- I feel guilty a lot of the time:.. 1 2 3 4 5 6 7 8 9 10
- I am not sure of what I am guilty:.. 1 2 3 4 5 6 7 8 9 10
- I always need to be in control:.. 1 2 3 4 5 6 7 8 9 10
- I feel like I have not grown emotionally since childhood:.. . . . 1 2 3 4 5 6 7 8 9 10
- I have a problem expressing my emotions:.. 1 2 3 4 5 6 7 8 9 10
- I am terrified of rejection:.. 1 2 3 4 5 6 7 8 9 10
- I am terrified of abandonment:.. 1 2 3 4 5 6 7 8 9 10
- I have difficulty following through on projects:.. 1 2 3 4 5 6 7 8 9 10
- I have a strong fear of failure:.. 1 2 3 4 5 6 7 8 9 10

Check the words that describe you or your mood, even if only part of the time:

- Shy Insecure Lonely Hopeless Lazy Daydreamer Perfectionist
- Anxious Worrier Moody Embarrassed Over-Sensitive Persecuted
- Hysterical Sad Inferior Inadequate Clumsy Negative Doubtful
- Perplexed Indecisive Superstitious Masochistic Self-Condemed
- Resentful Bitter Cruel Sarcastic Teaser Revengeful Rageful
- Hateful Violent Hostile Critical Argumentative (Curse)Swear
- Dominating Unforgiving Compulsive Disobedient Stubborn
- Rebellious Selfish Egotistical Self-Righteous Self-Sufficient
- Proud Inconsiderate Intolerant Irritable Impatient Aggressive
- Confrontive Restless Pouting Overly Competitive
- Jealous Frigid Impotent Greedy Depressed Tense Manipulative
- Possessive Ambivalent Confused Lying Guilty Frustrated

Comments or completion of previous items: _____

The information given on this questionnaire is accurate to the best of my knowledge and belief.

Client's signature: _____ Date: _____

Please read the attached "Client Disclosure Statement."