Sara E.C. Evans, M.S., MFT – 1325 E. Cooley Dr., #110, Colton, CA, 92324
(909) 580-0726 License # MFC45313

Personal Information

Name: ______________________________ Date: ______________________
Address: ______________________________ Home #: ______________________
City: ______________ State: _____ Zip: ___________ Work #: ______________________
Age: _____ Birth Date: ____/____/____ Sex: ____ Marital Status: S M D W Cell #: ______________________
Who lives with you? ____
Education (highest grade completed)? ______________ Currently a student? ______________
Name of School & City: ____
Your occupation: ______________________ Employer Name: ______________________
Spouse's occupation: ______________________ Employer Name: ______________________
Parent's Name (of Minor): ____
Siblings Name & Age (of Minor): ____
Emergency Contact: ____
Name Relationship Phone #

Insurance Information

Insurance Company Name (If you would like to use it): ______________________________
Address: ______________ City: ______________ State: ______ Zip: _________ Phone #: _________
Member/Certificate #: ______________ Group#: ___________ Insured's Name: ______________________
Insured's Date of Birth: ______________ Relation to Insured: Self Spouse Child SS#: ______________
Signature to allow my communication with your Insurance Company: ______________________________

Mental Health Issues

Please check the areas you want to work on or feel you may need help with:

self-awareness	legal/police	drinking	depression
marital	sexual	drugs	incest
family/parenting	emotional	financial	self-mutilation
suicidality	eating/weight	anxiety/stress	relationships
trauma	other (please describe): ______________________		

____

How long do you intend to commit to therapy? ______________________________________
Have you had previous psychological counseling? ___________ Previous therapist: ______________________
Location of previous therapy: ______________________ Length: ______________________
Are you currently taking medication: _______ What type? ______________________________
How did you hear about me? ____
May I say who I am if I phone your home? _______ work? ________ cell? _________