



FBC - Counseling & Discipleship Intake Form

Confidential: For FBC Counseling and Discipleship only.

This form will enable us to gain a quicker understanding of you and it will become a part of your confidential file. Please answer each question as completely as possible. If you are a couple, please fill out two forms, one for each person.

FBC

365 Union Street, Littleton, NH 03561
603-444-2763 • nhfaith.com/counseling

Counseling & Discipleship Ministry

Welcome to FBC (Faithful Biblical Counseling) the Counseling and Discipleship Ministry of Faith Bible Church, where we seek to offer Biblically based, Christ centered, advice and encouragement, while addressing many common issues of life. FBC desires to see lives transformed for God's glory. This includes recognizing and repenting of sin that is getting in the way of our transformation, recognizing who we are in Christ, and recognizing the power that comes from walking with the Holy Spirit.

FBC takes the counseling process very seriously. We understand the limits of counseling, the times of referral, and the seriousness of looking out for you or your family's safety. So, we will work with you to make this the most valuable experience possible.

When you schedule an appointment, you will be directed to fill out an Intake Form. FBC values your time, and so our intake form will help gather the information that would have been collected during the first meeting. This gives us all a jump on the healing process! Through the counseling process, we will address faulty views that hold you back, family and life experiences that caused you to be stuck, and ways to seek healing through new behaviors, thoughts, and patterns guided by the Holy Spirit.

Pastor Nick takes a solution-focused approach to recognize and build off of your current strengths and successes in life. This is based on the belief that we are a new creation in Christ and therefore can break free, with the Holy Spirit's help, from the negative patterns and behaviors that have hindered us in life.

[John 10:10](#)

*A thief (the world, our negative past, those who would abuse us) comes only to steal and kill and destroy. I (Jesus) have come so that **they may have life and have it in abundance.***

Counselors and Caregivers

Nick DeYoung is an ordained minister with a background in counseling and marriage and family therapy. He is a Biblically Certified Pastoral Counselor (BCPC), through the [International Board of Christian Care](#) (IBCC) and a member of the [American Association of Christian Counselors](#) (AACC). He is also certified as an [SYMBIS](#) premarital facilitator/counselor. Nick holds a bachelor's degree in Ministry and a master's degree in Marriage and Family Therapy.

Our full ministry team consists of pastoral staff and lay ministry partners. Your discipleship sessions may be provided by a lay minister. Lay ministers work under the guidance of pastoral staff. In this kind of discipleship process, the Holy Spirit, not the pastor/lay minister, is the agent of individual change—provided one cooperates with Him. Our goal is to present God's plan for personal change in the midst of one's circumstances by utilizing helping skills, prayer, Scripture, and spiritual/Biblical principles.



The lay ministry team do not possess professional licenses or certifications issued by the State of New Hampshire for the practice of professional counseling, marriage and family therapy, or social work specialties; nor do they necessarily possess the required education, experience, or training for such licenses. Referral options to outside professional providers are available upon request and given when counseling and discipleship issues are beyond the comfort and or ability level of Faith Bible Church staff and lay ministers.

This ministry does not claim to meet any counseling requirements for court, probation, parole-mandated counseling. We do not render any financial, legal, or medical opinions and or advice.

FBC does not charge a fee for counseling. If you would like to make a donation you may make a check out to Faith Bible Church, use the digital text to give option at 860-222-7321, or go to <https://nhfaith.com/give>. A suggested donation amount you can use would be \$50/session.

Confidentiality and Limitations

It is understood (and agreed) that all statements, whether written or verbal, with our pastoral / lay minister are of a confidential nature and ethically cannot be disclosed, without written consent, with the following exceptions that will result in confidentiality being waved.

1. Suspicion of abuse. We reserve the right and/or may be mandated by law to report abuse or suspicion of abuse of any type to the proper authorities.
2. Threats of harm to self or others. We reserve the right and/or may be mandated by law to disclose the appropriate person, agency, or civil authorities any threats of harm that a person may attempt or desire to do to one's self or to others.
3. Necessity of consultation. We reserve the right to consult with other discipleship lay ministers, pastors, counseling professionals, church leaders regarding your sessions. This consultation will be held in the same level of confidence as your sessions.
4. Referral process. If we feel the scope of the problem is beyond the expertise of FBC we will work with the counselee to find a qualified professional to continue counseling if desired.



Today's Date: _____

Contact Information

_____ • _____

Name: _____ Home Phone: _____

Address: _____ Cell Phone: _____

City: _____ State: _____ Zip: _____

Email: _____

Personal Information

_____ • _____

Birth Date: _____ Age: _____ Gender: _____ Marital Status: _____ Ever Divorced: _____

Family History

Name of Spouse: _____ Spouse's Age: _____ Years Married: _____

List children and their ages starting with oldest:

1) _____ 2) _____

3) _____ 4) _____

5) _____ 6) _____

Father's Name: _____ Mother's Name: _____

List brothers and sisters, deceased and alive, starting with the oldest and including yourself:

1) _____ 2) _____ 3) _____

4) _____ 5) _____ 6) _____

Work History

Occupation: _____ Employer: _____

Highest level of education: _____



Religious Information

Church affiliation: _____ Frequency: _____

Do you believe in God? _____ Do you consider yourself born again? _____

How often do you pray? _____ How often do you read the Bible? _____

Health Information

Health Care

Doctor / Clinic's name: _____ Phone: _____

Doctor / Clinic's name: _____ Phone: _____

Please list any prescribed medications or over-the-counter medications (herbs, supplements, etc.), you are currently taking, the dosage, and the reason for taking. _____

Concerns Checklist (check all that currently or recently apply to you)

- | | | |
|--|---|---|
| <input type="checkbox"/> Anger / Frustration | <input type="checkbox"/> Intrusive thoughts | <input type="checkbox"/> Employment problems |
| <input type="checkbox"/> Fearfulness | <input type="checkbox"/> Unsure about salvation | <input type="checkbox"/> Conflicts with co-workers |
| <input type="checkbox"/> Prolonged sadness | <input type="checkbox"/> Spiritual concerns | <input type="checkbox"/> Withdrawing from others |
| <input type="checkbox"/> Depression | <input type="checkbox"/> Distance from God | <input type="checkbox"/> Social / Relational stress |
| <input type="checkbox"/> Confusion | <input type="checkbox"/> Gambling problem | <input type="checkbox"/> Explosive anger |
| <input type="checkbox"/> Loneliness | <input type="checkbox"/> Pornography use | <input type="checkbox"/> Family tension |
| <input type="checkbox"/> Hopelessness | <input type="checkbox"/> Abuse: physical / sexual | <input type="checkbox"/> Family / Marital Violence |
| <input type="checkbox"/> Anxiousness | <input type="checkbox"/> Abuse: emotional / neglect | <input type="checkbox"/> Parenting struggles |
| <input type="checkbox"/> Guilt over the past | <input type="checkbox"/> Sexual concerns | <input type="checkbox"/> Marital difficulties |
| <input type="checkbox"/> Difficulty making decisions | <input type="checkbox"/> Physical problems | <input type="checkbox"/> Alcohol use / Abuse |
| <input type="checkbox"/> Financial problems | <input type="checkbox"/> Substance use / abuse | <input type="checkbox"/> Other (specify) |

Presenting Problems

Please describe the reasons for seeking help: _____



Please state what you have done so far to solve the problems you mentioned above: _____

On the scale below please estimate the severity of your problem(s):

1 ----- 5 ----- 10
Mildly upsetting Moderately upsetting Extremely upsetting

Please state your goals for discipleship: _____

Is there any other information that you think we should know? (use back side of form if needed)

I have carefully read this information sheet and agree to all of the stated terms and conditions. I also agree that all the information on my personal data form is true and complete to the best of my knowledge.

Printed Name

Signature

Date

Parent/Legal Guardian Signature (if minor)

Date