

CHILD INTAKE FORM

CHILD'S INFORMATION

DATE: _____ (Saw Parent) -/- Date _____ (Saw Child)

CHILD'S NAME: _____

DATE OF BIRTH: _____ Age _____ M _____ F _____

REFERRAL SOURCE: _____

PRIMARY CARE PHYSICIAN: _____

PRESENTING PROBLEM:

FAMILY INFORMATION

MOTHER: _____ S _____ M _____ D _____ AGE _____ OCCUPATION _____

FATHER : _____ S _____ M _____ D _____ AGE _____ OCCUPATION _____

OTHER ADULT IN HOME & RELATIONSHIP: _____

MARITAL HISTORY OF PARENTS: _____

SIBLINGS RELATIONSHIPS: _____

RELATIONSHIP OF MOTHER & CHILD: _____

RELATIONSHIP OF FATHER & CHILD: _____

FAMILY SOCIAL HISTORY:

(Living arrangements, current stressors/losses or trauma in past two years, history of guardianship)

CHILD - DEVELOPMENTAL HISTORY:

PARENT'S PREGNANCY - ATTITUDE, PLANNED: _____

PRENATAL CARE PROBLEMS: _____

FULL TERM: _____ INDUCED/NATURAL OR C-SECTION: _____
CONDITION AT BIRTH: _____
WEIGHT: _____ LENGTH: _____
OTHER PHYSICAL CHARACTERISTICS: _____
WALKING: _____
MENSES: _____

INPATIENT HOSPITALIZATION: (PHYSICAL TRAUMA & SIGNIFICANT MEDICAL PROBLEMS)

MEDICATIONS: _____
ALLERGIES: _____
SEIZURES: _____
HEADACHES: _____
STOMACH ACHES: _____
HEARING/SPEECH/VISION: _____

BEHAVIORAL/EMOTIONAL:

AGGRESSIVE/DESTRUCTIVE: _____ LYING: _____ STEALING: _____
TEMPER TANTRUMS: _____ FIGHTING: _____ NEGATIVISM: _____
DEPRESSED: _____ ANXIOUS: _____
CRIES EASILY WITH OR WITHOUT PROVOCATION: _____
NAIL BITING: _____
ANGERS EASILY: _____
SLEEP: (INITIAL WAKING PROBLEMS) NIGHTMARES: _____

BEDTIME RITUALS: _____

BEDWETTING: _____
DRUG EXPERIMENTATION - USE: _____
BIZARRE IDEAS: (PHOBIAS/DELUSIONS/HALLUCIANTIONS) _____

SOCIAL INTERACTIONS WITH PEERS: (CLOSE VS SUPERFICIAL) _____

WITHDRAWN OR FRIENDLY AND OUTGOING: _____
SEXUAL ISSUES: _____

ACTIVITY LEVEL: (FIDGETY, ATTENTION, COORDINATION) GOAL DIRECTED: _____

FAMILY - PSYCHIATRIC HISTORY:

CHILD - PRIOR PSYCHIATRIC HISTORY:

APPETITE: FAMILY MEALS: _____

SCHOOL HISTORY:

RESPONSIBILITIES: _____
DISCIPLINES/REWARDS/PUNISHMENT: _____

DAYCARE EXPERIENCE: _____ AGE: _____
PRESCHOOL: _____ HOW LONG: _____ PRESENT GRADE: _____ TRUANT: _____
SPECIAL: PLACEMENT/GRADE FAILURE: _____ TESTING: _____
SUBJECT PROBLEM: _____
REFUSES CLASSWORK OR HOMEWORK: _____
EASILY FRUSTRATED/PERFECTIONIST: _____
GOAL ORIENTED: _____

SPECIAL ABILITIES/ASSETS: _____
MOTIVATED ACHIEVEMENT: _____
DISRUPTIVE/FIGHTS: _____
OTHER: _____

