

Wellbeing Centre
 50 Junction Road
 Gillingham
 Kent
 ME7 4EQ
 Tel: 01634308490



Self-Assessment Form

A Self-Assessment form aims to help you and your therapist make an informed decision about beginning the work together. In addition, the Self-Assessment will be helpful for the therapist to understand more about what is going on for you, and what it is you'd like to achieve through therapy. All information you record on this form, and everything you discuss with Inspire Support Services and/or your therapist will be kept in strict confidence. Please see our confidentiality policy for more information on how your information is securely stored, kept confidential, and the relevant laws.

Name:	
Preferred Gender Pronoun:	
Date of Birth:	
Address:	
Telephone:	
E-mail:	
Preferred contact:	<i>Phone/Mobile/Email/Letter</i>

This Self-Assessment Form is the first step in accessing therapy, please complete this form honestly and to the best of your ability, if you need support completing the form please get in contact with the service. Tel: 01634308490

What are the main presenting issues that bring you to therapy?	
What would you like to gain from therapy?	
Have you had any thoughts about harming yourself in any way?	
What if applicable has prevented you from self-harming in the past?	

What do you do to relax? (E.g., hobbies, interests)	
Are you taking any medication?	
Do you drink alcohol, or do you use any non-prescription drugs?	
Do you have any formal diagnosis of a mental health condition?	
Please provide the contact details of your GP surgery:	
Would you prefer a female, male, or gender non-binary therapist?	
Do you have any special needs, accessibility issues, or physical impairments that we need to be made aware of?	
Are you looking for face-to-face or online therapy?	

Thank you for completing our Self-Assessment form, we appreciate this may have been difficult for you. Could you please return the form to Wellbeing@InspireSupportServices.com. A member of the team will be in contact shortly to arrange a day/time for a therapist to contact you.

If you feel unsafe or at risk of harm to yourself or others, please contact the relevant emergency services of one of the following crisis hotlines:

- Text 'SHOUT' to 85256
- Call The Samaritans Tel: 116 123
- If you're under 19 years old, call Childline Tel: 0800 1111

I hereby certify that the above statements are true and correct to the best of my knowledge.

Sign:

Date: