

## CONSENT TO COUNSELING

***Our Goal*** — Our goal in providing Christian counseling is to help you meet the challenges of life in a way that will please and honor the Lord Jesus Christ and allow you to enjoy fully His love for you and His plans for your life.

***Biblical Basis*** — We believe that the Bible provides thorough guidance and instruction for faith and life. Therefore, our counseling is based on scriptural principles rather than those of secular psychology or psychiatry.

***Not Professional Advice*** — Some of our counselors work in professional fields outside the church. When serving as counselors within this church, however, they do not provide the same kind of professional advice and services that they do when they are hired in their professional capacities. Therefore, if you have significant legal, financial, medical or other technical questions, you should seek advice from an independent professional. Our pastoral and lay counselors will be happy to cooperate with such advisors and help you to consider their counsel in the light of relevant scriptural principles.

***Confidentiality*** — Confidentiality is an important aspect of the counseling process, and we will carefully guard the information you entrust to us. There are four exceptions, however, when it may be necessary for us to share certain information with others: when a counselor is uncertain of how to address a particular problem and needs to seek advice from another pastor or elder in this church; when a counselee attends another church and it is necessary to talk with his or her pastor or elders; when there is a clear indication that someone may be harmed (such as: homicidal or suicidal threats and abusive situations) unless others intervene; or when a person persistently refuses to renounce a particular sin and it becomes necessary to seek the assistance of others in the church to encourage repentance and reconciliation (see Proverbs 15:22; 24:11; Matthew 18:15-20). Please be assured that our counselors strongly prefer not to disclose personal information to others, and they will make every effort to help you find ways to resolve a problem as privately as possible.

***Resolution of Conflicts*** — On rare occasions a conflict may develop between a counselor and a counselee. In order to make sure that any such conflicts will be resolved in a biblically faithful manner, we require all of our counsees to agree that any dispute that arises with a counselor or with this church as a result of counseling will be settled by mediation and, if necessary, legally binding arbitration in accordance with the *Rules of Procedure* of the Institute for Christian Conciliation; judgment upon an arbitration award may be entered in any court having jurisdiction. (We will be happy to provide you with booklets that explain the Christian conciliation process and describe its benefits and procedures.)

Having clarified the principles and policies of our counseling ministry, we welcome the opportunity to minister to you in the name of Christ and to be used by Him as He helps you to grow in spiritual maturity and prepares you for usefulness in His body. If you have any questions about these guidelines, please talk with your counselor.

### **Members and or frequent visitors of The Bible Church of Little Rock (BCLR)**

To be involved in counseling at BCLR, you must agree to do the following:

1. Agree to attend Sunday morning worship service and one of our equipping hour classes each week (we understand that sickness and being out of town will affect your attendance, but we expect you to attend a high percentage of these services).
2. Each week you are required to send your counselor an email (If you do not have email, you can call your counselor.) stating which equipping hour class you attended and what two things you learned. You are also required to include what two things you learned from the Sunday morning worship service.
3. You are also required to do all homework assignments. If you have not done the homework by the day before your counseling session, then you should call your counselor and tell him how much of the homework you have completed. He has the right to tell you that he will not meet with you until you have completed X% of the homework or until you have completed the assignments he specifies.
4. It is highly recommend that you join a care group. If the counselor desires, he can require that also.

If these guidelines are acceptable to you, please sign below.

Signed \_\_\_\_\_ Date \_\_\_\_\_

## PERSONAL DATA INVENTORY

Please complete this inventory carefully  
(Question marks have been eliminated)

### PERSONAL IDENTIFICATION

Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Age \_\_\_\_\_ Sex \_\_\_\_\_ Referred By \_\_\_\_\_

Marital Status: Single \_\_\_\_\_ Engaged \_\_\_\_\_ Married \_\_\_\_\_ Separated \_\_\_\_\_

Divorced \_\_\_\_\_ Widowed \_\_\_\_\_

Education (last year completed) \_\_\_\_\_

Email address: \_\_\_\_\_ Cell Phone \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Employer \_\_\_\_\_ Position \_\_\_\_\_ Years \_\_\_\_\_

In case of an emergency, please contact: \_\_\_\_\_ (name)

\_\_\_\_\_ (phone number)

The counselor has my permission to call the person(s) above for any emergency.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### MARRIAGE AND FAMILY

Spouse \_\_\_\_\_ Birth Date \_\_\_\_\_

Age \_\_\_\_\_ Occupation \_\_\_\_\_ How Long Employed \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Date of Marriage \_\_\_\_\_ Length of Dating \_\_\_\_\_

Will your spouse come in with you if needed? Yes / No (circle)

Does your spouse know that you are coming? Yes / No (circle)

\_\_\_\_\_

Have either of you been previously married? \_\_\_\_\_ Who \_\_\_\_\_

Have you ever been separated? \_\_\_\_\_ Filed for divorce \_\_\_\_\_

Have you ever been arrested? \_\_\_\_\_

Information about Children:

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_ Living \_\_\_\_\_ Yr. Ed. \_\_\_\_\_ Step-Child \_\_\_\_\_ Adopted \_\_\_\_\_

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**HEALTH**

Describe your health \_\_\_\_\_

Do you have any chronic conditions \_\_\_\_\_ What? \_\_\_\_\_

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List important illnesses and injuries or handicaps \_\_\_\_\_

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Date of last medical exam \_\_\_\_\_ Report \_\_\_\_\_

Physician's name and address \_\_\_\_\_

Current medication(s) and dosage \_\_\_\_\_

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Have you ever used drugs for other than medical purposes \_\_\_\_\_

If yes, please explain \_\_\_\_\_

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Do you drink alcoholic beverages \_\_\_\_\_ If so, how frequently and how much \_\_\_\_\_

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Do you drink coffee \_\_\_\_\_ How much \_\_\_\_\_ Other caffeine drinks \_\_\_\_\_

\_\_\_\_\_ How much \_\_\_\_\_

Do you smoke \_\_\_\_\_ What \_\_\_\_\_ Frequency \_\_\_\_\_

Have you ever had interpersonal problems on the job due to health issues? \_\_\_\_\_

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Have you ever had a severe emotional upset \_\_\_\_\_ If yes, explain \_\_\_\_\_

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Have you ever seen a psychiatrist or counselor \_\_\_\_\_ If yes, explain what the problem was .

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Are you willing to sign a release of information form so that your counselor may write for social, psychiatric or other medical records \_\_\_\_\_

**WOMEN ONLY**

Have you had any menstrual difficulties \_\_\_\_\_ Do you experience tension, tendency to cry, other symptoms prior to your cycle, please explain \_\_\_\_\_

Is your husband willing to come for counseling? \_\_\_\_\_

Is he in favor of your coming \_\_\_\_\_ If no, explain \_\_\_\_\_

**SPIRITUAL**

Denominational preference \_\_\_\_\_

Church attending \_\_\_\_\_ Member \_\_\_\_\_

Church attendance per month (circle)      0   1   2   3   4   5   6   7   8+

Do you believe in God \_\_\_\_\_ Do you pray \_\_\_\_\_ Would you say you are a Christian \_\_\_\_\_ or still in the process of becoming a Christian \_\_\_\_\_

Have you been baptized \_\_\_\_\_

How often do you read the Bible \_\_\_\_\_ Never \_\_\_\_\_ Occasionally \_\_\_\_\_ Often \_\_\_\_\_ Daily

Explain any recent changes in your religious life \_\_\_\_\_

## **BRIEFLY ANSWER THE FOLLOWING QUESTIONS**

1. What is your problem (what brings you here)?
2. What have you done about this problem?
3. What are your expectations from counseling?
4. Is there any other information we should know?

# SPIRITUAL CONVICTIONS QUESTIONNAIRE

(Taken from Wayne A. Mack, *Preparing for Marriage: God's Way*)

Finish the following sentences with two or three answers each.

1. God is \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Jesus Christ is (describe who you think He is, what He has done, what He is doing now, what place He has in your life, what He means to you, etc.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. My relationship to God and His Son Jesus Christ is (describe the kind of relationship you have with God and how important that relationship is - be specific) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. A Christian is \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. I know that I am (or am not) a Christian because \_\_\_\_\_

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6. The Bible is (describe what you think it is, what it means to you, what place it has in your life, how you use it, etc.) \_\_\_\_\_

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7. Sin is \_\_\_\_\_

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8. My chief sins are \_\_\_\_\_

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9. When I sin, I (describe how you handle sin, what you feel when you sin, what you do after you sin) \_\_\_\_\_

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10. I feel guilty when \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. I pray (when, how, why, what for, etc.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. My chief goals in life are \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13. I want (or do not want) to attend and be involved in church (answer the questions “how” and “why”) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. I believe fellowship with other Christians is (define what it is, what it involves, how important it is, and how it can be developed) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

15. I am promoting my spiritual growth and the spiritual growth of my partner by \_\_\_\_\_

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16. My partner and I differ in spiritual matters (when, how, over what, etc.) \_\_\_\_\_

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17. The changes I would like to make in my own spiritual life are \_\_\_\_\_

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18. The changes I would like my partner to make spiritually are \_\_\_\_\_

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Review your answers. Are there any that you would like change? Which ones? Why? Are there any to which you do not know the answer? Which ones? Compare and discuss your answers with your partner. Write down your impressions of this study. What have you learned about yourself and what have you learned about your partner? What changes do you need to make in light of this study?