Thank you for your enquiry regarding counselling/psychotherapy.
Please fill in the interactive form below and return to me via email; this will help me assess if I am the right therapist for you.

|  |  |
| --- | --- |
| Name: |  |
| Telephone: |  |
| Email: |  |
| Age: |  |
| Are you looking for face-face or telehealth counselling? | Face-to-face [ ] Video [ ] Telephone [ ]  |
| How did you find out about my practice? (e.g. word of mouth, GP, online search [please include keywords used], Psychology Today/other database?) |  |
| Do you require a concession rate, or seeking other form of financial assistance?(see website for info. re options/eligibility) | Yes [ ] No [ ] Assistance sought:  |
| Please provide a summary of the issue/s you would like to work on:  |  |
| What have been your previous experiences with counselling/therapy, both good and bad? | Good:  Bad:  |
| Do you need a counsellor that can provide a diagnostic assessment or report?  | Yes [ ] No [ ]  |
| Are you facing (or likely to face) any legal issues? | Yes [ ] No [ ]  |
| Do you have a preference regarding the frequency of treatment, e.g. weekly, fortnightly? If yes please state. | Yes [ ]  No [ ] weekly [ ]  fortnightly [ ]  monthly [ ]  other [ ]   |
| Do you have a preference regarding the length of treatment, e.g. brief therapy, longer term? If yes please state. | Yes [ ] No [ ] Length of treatment:  |

Thank you for completing the form.

Please forward to me at eleni.connect@protonmail.com and I will be in touch with you shortly.