

# 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:

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## ***FAMILY INFORMATION***

MOTHER: \_\_\_\_\_ S \_\_\_\_\_ M \_\_\_\_\_ D \_\_\_\_\_ AGE \_\_\_\_\_ OCCUPATION \_\_\_\_\_

FATHER : \_\_\_\_\_ S \_\_\_\_\_ M \_\_\_\_\_ D \_\_\_\_\_ AGE \_\_\_\_\_ OCCUPATION \_\_\_\_\_

OTHER ADULT IN HOME & RELATIONSHIP: \_\_\_\_\_

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MARITAL HISTORY OF PARENTS: \_\_\_\_\_

SIBLINGS RELATIONSHIPS: \_\_\_\_\_

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RELATIONSHIP OF MOTHER & CHILD: \_\_\_\_\_

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RELATIONSHIP OF FATHER & CHILD: \_\_\_\_\_

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FAMILY SOCIAL HISTORY:

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

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**CHILD - DEVELOPMENTAL HISTORY:**

PARENT'S PREGNANCY - ATTITUDE, PLANNED: \_\_\_\_\_  
\_\_\_\_\_  
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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: \_\_\_\_\_  
\_\_\_\_\_  
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FAMILY - PSYCHIATRIC HISTORY:

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CHILD - PRIOR PSYCHIATRIC HISTORY:

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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: \_\_\_\_\_