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Goals for Counselling

Name _____ Date _____

Please take some time to think about these questions. Fill out what you are able to.

Please describe the issue or concern about which you are coming in for counselling?

When did this concern start? Can you describe a history of it?

What else was occurring or occurred as this concern developed?

What do you hope to accomplish by the time you are finished?

How will you be feeling different?

In what way will your thinking about yourself or your situation be different?

What skills do you hope to develop?

What will you be doing differently?