

Faith Baptist Church – An Introduction & Consent to Biblical Counsel

Our Goal – Our goal in providing biblical 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.

Our Authority and 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. Although some of the pastoral or lay counselors of this church may be licensed in other fields, they will only practice as Biblical counselors. Any needs regarding legal, financial or medical advice should be obtained from an independent practitioner.



Confidentiality – Confidentiality is an important aspect of the counseling process, and we will carefully guard the information you entrust to us. There are situations, 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 of 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 (including abuse, self-harm or suicidal intentions) 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). Lastly, there are certain legal situations where disclosure may be necessary. 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 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 counselees to agree that any dispute that arises with a counselor, or with this church as a result of counseling, will be settled by mediation within the church according to the principles of scripture and the authority of this local church.

Counselor/Counselee Rights – This counseling agreement is. FBC may terminate counseling due to noncompliance of care, failure to keep appointments, violent or threatening behavior, criminal activity and/or intent, or any related issues. The counselee may also terminate counseling at any time.

To the fullest extent of the law, Counselee shall indemnify and hold harmless the Counselor, FBC, its officers, employees, agents, and representatives from and against any and all costs, damages, claims and expenses, including attorney's fees, or liabilities arising out of, resulting from, or in connection with the services provided in this agreement.

Having clarified the principles and policies of our counseling ministry, we welcome the opportunity to minister to you in the name of Jesus 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 to a pastor or elder. If these guidelines are acceptable to you, please sign below.

Signed: _____ Dated: _____

Counseling Information Form

PERSONAL INFORMATION:

Date _____

Name _____ Best Phone _____

Address _____ City _____ State _____ Zip _____

Occupation _____ Email _____ Sex _____

Birth Date _____ Age _____ Education _____ Training _____

Marital Status: ---

HEALTH INFORMATION:

Rate your health: ---

List all important present or past illnesses, injuries or handicaps:

Date of last medical exam _____ Result _____

Weight changes recently? Lost _____ Gained _____ Have you ever been arrested? ---

Are you taking medication: --- (purpose) _____

Have you used drugs for other than medical purposes? --- What? _____

RELIGIOUS BACKGROUND:

Denominational preference: _____ Member: ---

Church attendance per month: ---

Church attendance in childhood: _____ Baptized? ---

Religious background of spouse (if married): _____

Do you believe in God? --- Do you pray to God? --- Are you saved? ---

How much do you read the Bible? --- Do you have regular family devotions? ---

Explain your religious life:

COUNSELING HISTORY:

Have you ever had any psychotherapy or counseling before? --- Dates: _____

The counselor or therapist: _____

What was the outcome?

MARRIAGE AND FAMILY INFORMATION:

Name of Spouse: _____ Address _____

City _____ State _____ Zip _____ Phone _____

Your Spouse's Age _____ Education (in years) _____ Religion _____

Is your spouse willing to come in for counseling? ---

Have you ever been separated? --- When? From _____ To _____

Has either of you ever filed for divorce? --- When? _____

Date of marriage: _____ Your ages when married: Husband _____ Wife _____

How long did you know your spouse before marriage? _____

Information about children:

Name	Age	Sex	Living Y/N	Education	Years Married
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_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Denote with an * if child is by a previous marriage, please.

If you were raised by anyone other than your own parents, briefly explain:

How many older siblings do you have? Brothers _____ Sisters _____

How many younger siblings do you have? Brothers _____ Sisters _____

PLEASE ANSWER THE FOLLOWING QUESTIONS BRIEFLY:

1. What is the main problem, as you see it? What brings you here?
2. What have you done about it?
3. What can we do? What are your expectations in coming here?
4. As you see yourself, what kind of person are you? Describe yourself.