## **Candlelight Christian Fellowship**

| Diago   |                     | e-Counselin    | -               | nnaire<br>person receiving       | counceling            |     |
|---|---------------------|----------------|-----------------|----------------------------------|-----------------------|-----|
| Today's Date:   | -                   | -              | maiviauar       | Jerson receiving                 | counsening            |     |
| Last Name   |                     |                | First Name      |                                  |                       |     |
| Home Phone #  | Cell #              |                | Email           |                                  |                       |     |
| Age Group:<br>□ Under 18  □ 18-25   | □ 26-35             | □ 36-45        | □ 46-60         | □ 60+                            |                       |     |
| Spouse  |                     |                |                 |                                  |                       |     |
| Address   |                     | City           |                 |                                  | State                 | Zip |
| <u>Name</u><br>Children living in the home  |                     |                | <u>M/F</u>      | Grade                            |                       |     |
|   |                     |                |                 |                                  |                       |     |
|   |                     |                |                 |                                  |                       |     |
|   |                     |                |                 |                                  |                       |     |
| Please explain the desired re   | esult you anticipat | e achieving as | a result of yo  | our counseling requ              | iest:                 |     |
|   |                     |                |                 |                                  |                       |     |
|   |                     |                |                 |                                  |                       |     |
|   |                     |                |                 |                                  |                       |     |
| Nature of Guidance:<br>Pre-marital Marriage Family<br>Emotional Religion Discipleship |                     |                |                 | □ Re-marriage<br>□ Drugs/Alcohol | □ Singlene<br>□ Other |     |
| □ Referred from:  |                     |                | Io referral - I | attend Candlelight               |                       |     |
| First Time: 🗆 No 🗆 Y  | ′es                 |                |                 |                                  |                       |     |
| Prior Meeting: 🗆 No 🛛 Yes, with:  |                     |                |                 | Date:                            |                       |     |

Since you have requested to counsel with one of our ministry staff, there are a few things you need to understand about our approach:

- Your minister is a Christian and is committed to the Bible as the inspired Word of God (2 Peter 1:20, 21). Their training is primarily in the Bible and the consistent application of its truths to your daily life (2 Timothy 3:16, 17). Therefore, our time is based on the Bible as the final guide and authority.
- 2. The goal of our time is to teach you what the Bible says regarding your need. It is our conviction that a clear understanding of God's Word, as revealed through the Bible, and a commitment on your part to follow God's Word, is what will lead to a significant change in your life. (Psalm 119:9, 18, 105, 130)

- We do not want to create a dependency relationship between you and the minister. Rather, we want to
  introduce you to the person of Jesus Christ, and to help you develop a relationship with Him as your personal
  counselor. Your dependency needs to be on God, through Jesus Christ, and not on people (Proverbs 29:25,
  Ecclesiastes 12:13) Therefore, there is a limit in the number of times a minister will meet with you regarding any
  specific problem.
- 4. We believe the basic need of every person is a solid, consistently maintained, personal relationship with God through Jesus Christ. We believe that a good relationship is the basis for resolving many conflicts. Unless there is a right relationship between a person and God, he/she will be continually struggling with a need to fill a deep inner void, which can only be filled by Christ's indwelling presence. The futile attempt to meet this inner need in some manner other than that designed by God often leads to abusive and self-destructive behaviors. Therefore, filling this spiritual vacuum in one's life is critical to effective healing and change.

This relationship with God comes when an individual depends on Jesus Christ as the one who died on the cross in his/her place and bore the guilt and wrath due to all because of sins we have committed against God **(John3:16-21), Romans 3:23, 6:23).** Surrendering one's life to Christ in itself may not immediately resolve all your conflicts and problems, but it is a necessary step in putting your life in order and making God's life changing power available and operative in your life.

If you are uncertain about your relationship to Jesus Christ, your minister will be glad to speak to you about it. Simply indicate your interest at your next session.

5. We want to help you develop skills which will help you better manage your life and your personal relationships.

Again, we believe the Bible provides the necessary guidelines for developing and maintaining healthy, fulfilling personal relationships. If you are unwilling to seriously consider and apply what God says through the words of the Bible, we would encourage you to seek help elsewhere.

- 6. We are not here to give medical advice; however, we can point out scriptural problems, offer biblical solutions, and pray with you for these truths to be worked out in your day-to-day life.
- 7. We preserve confidentiality except in cases where criminal law codes or church discipline procedures countermand it.

## Acknowledgement

This is to acknowledge I understand the ministers at Candlelight Christian Fellowship are not professional "psychiatrists" or "psychologists", and I understand their guidance is based on the Bible alone. I understand I am solely responsible for my own actions. Therefore, I will not hold Candlelight Christian Fellowship, its staff, or my minister responsible or liable for anything whatsoever connected with the guidance I receive.

Signature: \_\_\_\_\_

Date:\_\_\_\_\_

Return completed form to the church office at the address below. You will be contacted by the office to schedule an appointment.

Official Use Only: Received By: \_\_\_\_\_

Date Received: \_\_\_\_\_