

# Diagnostic Assessment - Adult



**Alexander J. Muzichuk, M.A., PLPC**

- ✓ Individual Counseling  
*Children • Adolescents • Adults*
- ✓ **Marriage & Family Counseling**

**Name:** \_\_\_\_\_

**Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

Describe your reason for seeking counseling. What are your goals? What are your expectations?

---

---

---

What is the current situation or problems that are happening?

---

---

---

List your history of previous counseling or substance abuse treatment.

---

---

---

List any diagnosis you have and medications you are currently taking.

---

---

---

List current emotional and behavioral issues you are experiencing.

---

---

---

Describe current work/employment functioning.

---

---

---

Describe current family situation and functioning.

---

---

