

**Franciscan University of Steubenville
Wellness Center
Request for Counseling Services**



Last Name: _____ First Name: _____ Student ID #: _____

Today's Date: _____ Semester/Year: _____

Sex: Male Female Date of Birth: _____ Age: _____

Living Situation: Residence Hall _____ Room # _____ Mail Box # _____
 Off-Campus Address _____

Phone: Mobile: _____ Landline (if applicable) _____

May we text message you appointment reminders? If yes, please provide your mobile phone carrier/provider (e.g., AT&T, Verizon, T-Mobile, Sprint, etc.): _____

Preferred Email: _____

Academic Year: Freshman Sophomore Junior Senior Graduate

Major: _____

Referral Source: Self Other (specify): _____

Emergency Contact: Name _____ Phone _____

Your Home Address: _____

Reason for requesting counseling: _____

Have you had previous counseling here? No Yes, with _____

**you may request a specific counselor, but we may not be able to accommodate your request*

OFFICE USE ONLY

Counselor Assigned: _____ Type: New Returning

Date/Time of Contacts: _____

Last Updated: 07/20/17

Name: _____

*Directions: please mark the days and times of when you **are available** to meet for counseling. Evening hours (5:00 PM to 8:00 PM) vary from semester to semester.*

| Time | Monday | Tuesday | Wednesday | Thursday | Friday |
|-------------|---------------|----------------|------------------|-----------------|---------------|
| 8:30 AM | | | | | |
| 9:00 AM | | | | | |
| 9:30 AM | | | | | |
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| 6:00 PM | | | | | |
| 6:30 PM | | | | | |
| 7:00 PM | | | | | |
| 7:30 PM | | | | | |
| 8:00 PM | | | | | |

Franciscan University of Steubenville
Wellness Center Counseling Services
Phone: (740) 284-7217



Greetings,

Thank you for your interest in counseling services from the Franciscan University of Steubenville Wellness Center. One of our counselors will be in contact with you soon to schedule an appointment. We ask that you:

- be on time for your appointments
- check in with our secretary when you arrive, paying any fees due
- notify us as soon as possible if you have to cancel an appointment
- respect the confidentiality of all other students in the Wellness Center

Be aware that:

- if you miss appointments frequently, you may lose your scheduled weekly appointment time
- your counselor may ask you to join a counseling group in place of or in addition to one-on-one counseling

If you have any questions, comments, or concerns, you may contact me via telephone (740) 284-7217 or email mburriss@franciscan.edu.

God Bless,

Matthew Burriss, MA, LPCC-S
Director of the Wellness Center