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**Career Intake Sheet**

1. What are your most urgent life concerns right now?
2. What are your most important career objectives?
3. Considering your financial responsibilities at this time, what would be a reasonable acceptable income for you?
4. What are your greatest personal strengths?
5. What words or phrases would you or those who know you well (spouse, friends, co-workers) use to describe you?
6. What skills, hobbies or vocational interests do you have?
7. What have been the most satisfying aspects of your work situations? (These could relate to supervision, personnel, co-workers, tasks, work environment, salary or income, physical activity or responsibilities)
8. What have been the most dissatisfying aspects of your work situations?

Physical History:

Date of last physical examination:

Family Physician:

Height:

Weight: Now One year ago Ideal

Physical Disabilities or problems