

Intake Form for Potential Participants



Dear potential participant:

Thank you for your time and attention in filling out these forms. Your answers will be kept confidential and read only by a program director. This form allows Living Aspen program director(s) to know you better and what programs would be a fit for you on your journey. A program director will get together with you soon to discuss your answers and inform you of more details about the upcoming group.

Confidentiality within the group is very important, and facilitators will not discuss who is in the group, or details of your story, with anyone outside the group without your permission.

Please email this completed form to the hello@livingaspen.org.

Or Mail to:

Living Aspen
PO Box 2293
Arvada, CO 80001

Thank you!

Name:		
Address:		
City:	State:	Zip:
Home #	Work #	Cell #

Single Married Separated Divorced Widowed

1. I am 18 years of age or older. Circle one: YES or NO

Level of Education: please circle appropriate box

Some High
School

High School
Graduate

Some College

College
Graduate

Trade School

2. Please briefly describe your story of pain or abuse (or how you are in relationship with someone who has been abused) and why you are interested in participating in Living Aspen classes, programs, or events.

3. Do you have any concerns that may prevent you from attending group(s) regularly?

4. Are you currently in relationships that are safe and free of abuse?

5. Are you at a time of great stress or important transition in your life?

6. Do you currently have mental health support in your life?

The effects of abuse sometimes lead to other struggles that we are not equipped to handle in depth during meetings. If you are struggling with any behaviors with which you may need some extra support outside of the group, such as but not limited to: recreational drug use, alcohol addiction, an eating disorder, workaholism, sexual addiction, internet addiction, spending addiction, or codependency you will need to find support from a licensed counselor. If you do not have support through counseling you may contact **Jefferson Center for Mental Health, 4643 Wadsworth Blvd., Wheatridge, CO 80033, phone: 303-425-0300**

Thank you for your willingness to complete this form. We will be in touch with you soon. It takes great courage to begin and remain in a healing journey.