

Questionnaire

Personal data:

Name: _____

First Name: _____

Address: _____

E-Mail: _____

Date of birth: _____

Gender: female male
 other: _____

Nationality: _____

Phone number: _____

Mobil phone: _____

If you don't want to answer a question, please cross it out.

Earlier utilisation of offers of our institution (ptb)

Counseling via e-mail or chat: nickname: _____

Workshop or group: _____ in (year): _____

consultation with: _____ in (year): _____

Family/Accommodation

Family status: single married/registered partners
 solid relationship other: _____

Children: no yes, number of: ____ Age of children: _____

single household with parents with partner with partner and (own) children

flat share university housing other: _____

Indication of counseling (please only one answer):

instructor/tutor internet student guide university calender

flyer poster Service-Center ZSB (students advice office)

friends/fellow student other: _____

Details on study/profession:

What do you study? Subject: _____

Attempted degree: BA MA graduation/ph.D. other: _____

Name of university: LUH HSH TiHo MHH HMTMH other: _____

Semester in current subject (without Ba/Bsc – Semester): _____

Semester in total (incl. Semester off – and/or BA/Bsc – Semester): _____

Have you ever changed your subject? yes no

Did you complete a degree (incl. BA/Bsc)?

yes, as _____ no

University entrance qualification?

Immaturenprüfung Technical or vocational baccalaureate other: _____

European baccalaureate

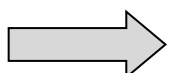
Did you complete a vocational training? yes, as: _____ no not completed

How do you finance your study? (several answers possible)

BAföG work support by parents support by other persons

scholarship other: _____

Please turn and complete back side!



Please mark three reason(s) at most for your consulting request:

- Organisation of work/time-management
- Learning or work disruption/performance problems
- Test anxiety
- Inhibition to speak
- Writer's block
- Choice of degree course/drop out
- Problems completing your study
- Financial problems
- Problems with identity and self-esteem
- Problems with parents and/or other family members
- Social contact problems/problems in groups/social fears
- Problems in your partnership
- Problems with your economic future/future career
- Problems with migration/cultural identity
- Problems dealing with high stress/exhaustion
- Problems with sexuality or sexual orientation
- Fears/anxiety
- Depressive phase
- Eating disorders
- Substance abuse/addictions
- Suicidal tendency
- Physical illness/psychosomatic troubles
- Psychiatric illness
- Search for long-term therapy
- Trauma
- Conflicts in your working environment
- Conflicts with friends and flat mates
- Others (please specify):

Please mark three reason(s) at most

Date: _____