

DVC - WELLNESS and MENTAL HEALTH PROGRAM

Pleasant Hill Campus 925-969-2148
 San Ramon Campus 925-551-6204
 WellnessDVC@email.4cd.edu

Contra Costa Community College District Referral Form

College/Campus:

CCC DVC PH DVC SR LMC Pitt LMC BW

Brief short-term therapy up to 5 sessions

Date of Referral:		Student's Name (Last, First): Preferred Pronouns:
Referred by:	<input type="checkbox"/> Program/ Dept./Office (specify): <input type="checkbox"/> Faculty (name): <input type="checkbox"/> Other (specify): <input type="checkbox"/> Self:	Student ID#:
		Student's phone number:
		Student's email address:
Location:	<input type="checkbox"/> Pleasant Hill Campus <input type="checkbox"/> San Ramon Campus <input type="checkbox"/> Available for Wellness Counseling at either campus	Are you currently enrolled this semester at DVC? Yes No
		Age:
		Have you seen a Wellness Counselor before? Yes No

Reasons for Referral (check ✓ or circle ○ all that apply):

<input type="checkbox"/> Anxiety / Stress	<input type="checkbox"/> Personal Crisis/Trauma: Past or Present
<input type="checkbox"/> Behavioral Issue	<input type="checkbox"/> School – academic issues
<input type="checkbox"/> Depression	<input type="checkbox"/> Other (body image, learning disability, LGBTQIA, relationship issues, veteran)
<input type="checkbox"/> Loss/Grief	<input type="checkbox"/> Basic needs support: housing, food, job

Description of reason for therapy:

Have you been to therapy before? Are you currently working with any mental health professional?

Other programs / agencies / professionals currently involved with student (if known):

Would you be able to access free counseling off-campus?

Yes No, Reason: _____

Other relevant information (if any):

Times Available to be seen (Mark ✓ all times you are available):

Day/Time	8AM	9AM	10AM	11AM	12 noon	1 PM	2PM	3PM	4 PM	5PM	6 PM
Monday	n/a									n/a	n/a
Tuesday	n/a	n/a									
Wednesday										n/a	n/a
Thursday	n/a	n/a	n/a	n/a	n/a					n/a	n/a
Friday								n/a	n/a	n/a	n/a

cccr
SAP
email

Therapist Assigned To:	
Date/Time Assigned:	