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**TELL US ABOUT THE PERSON WHO HAS DIED & YOU**

1. Name and age of the deceased .....
2. Relationship of the deceased to you .....
3. Date of death.....      4. Place of death .....
5. Cause of death .....
6. Is there a particular anniversary or special occasion coming up that you might find difficult to cope with?  
 Y    N   If yes please give details: .....

**TELL US ABOUT YOUR CIRCUMSTANCES**

7. Are there any formal processes pending which are having an influence on your bereavement such as court case, inquest, probate, etc?    Y    N  
 If yes, please give details .....
8. Do you receive support from any of the following (please give further details):
  - a. Family members .....
  - b. Friends & neighbours .....
  - c. Outside groups/organisations .....
9. Are there any children aged under 19 living at your home?    Y    N  
 If yes, how many children live with you .....
10. Have you experienced other losses and bereavements in the past?    Y    N  
 If yes, please give details .....
11. Have you received any counselling/support in the past?.....

**TELL US ABOUT YOUR MEDICAL SUPPORT & CONDITIONS**

12. Are you receiving any medical help at present and/or are you on medication?    Y    N  
 If yes, please specify .....
13. Please provide the name of your doctor and the contact number  
 .....      ***/ continued over***

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**THIS HELPS US IN CONTACTING & MEETING YOU**

14. Do you live alone?       Y    N

15. Do you work?             Y    N

    If yes are you able to get time off during the day?       Y    N

16. Is it acceptable to leave a message on your phone?      Mobile:  Y  N    Home Tel:  Y  N

17. When is the best time to make contact?                     Morning    Afternoon    Evening    Anytime

18. Do you have a disability?  Y    N

    If yes please give details .....

**DESCRIBE YOUR CONCERNS & FEELINGS**

19. What are your main concerns or worries at present?

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**Are you affected by these issues**     some of the time    most of the time    all of the time    *(please tick one box)*

20. Tell us your story. Please use the rest of the page to express your feelings and thoughts on your grief and bereavement *(continue on a separate page should you wish)*

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**YOUR CONFIDENTIALITY:** Cruse operate strict confidentiality procedures in line with best practices as recommended by BACP. This is in addition to the normal requirements covered by the Data Protection Act 1998.