

THE FORENSIC HISTORY QUESTIONNAIRE

CURRENT STATUS

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I. Current Status

1. Name _____

2. My Referral:

- Voluntary, referred by my attorney
- By a mediator, counselor, or guardian ad Litem
- By agreement between the attorneys
- In compliance with a court order
- Involuntary or referred by opposing counsel

3. I consider my intellectual ability to be:

- Below average
- Average
- Above Average

4. I usually speak:

- More than most people
- About as much as most people
- Less than most people
- Rapidly Slowly
- Softly Loudly

5. What I like most about myself now is: _____

6. What I like least about myself now is: _____

7. What I would most like to change about myself is:

8. The psychological problem that I have that causes me the most concern currently is:

9. The date this problem began was about _____ and I believe it was caused by:

10. The sources of satisfaction in my life in the last three months have been:

- Pride in myself or others
- Sense of authority
- Sense of purpose
- Personal growth
- Spiritual beliefs
- Philosophical Beliefs
- Job and professional success
- Financial security
- Intellectual abilities
- Artistic talents
- Physical well-being
- Athletic ability
- Friendship
- Trust and openness

- Love and affection
- Intimacy and sex
- Family Relationship
- Parenting / Childcare
- Charity
- Serving a cause

- Hunger
- Fatigue
- Non-prescribed meds
- Alcohol
- Prescribed meds
- Fatigue
- Pain

11. Currently, I approximately or typically::

- Sleep.....
- _____hours each day
- Commute to
- work....._____ho
- urs each day
- Work outside the
- home....._____hours
- each week
- Work at
- home....._____
- _____hours each week
- Travel overnight out of
- town....._____days each
- month
- Eat....._____meals each day;
-_____calories each day
- Bathe.....
- _____times per week
- Exercise.....
- _____hours each week
- Play.....
- _____hours each week

12. My height is
ft.
 _____in.

13. My current weight is
 pounds

14. My ideal weight would
 be..... pounds

15. My attention or concentration recently
 seems to be effected by:

Stress from:

Discomfort from:

Physical pain from:

16. All prescribed medications I have taken in
 the last three months
 are:_____

17. I have fully and completely complied in
 taking each of the above medications exactly
 as prescribed: ___Yes ___No

18. Over the past three months, I have typically
 consumed:

- Glasses of cans of caffeinated soda a day
- Cups of caffeinated coffee per day
- Cup of caffeinated tea per day
- Glasses or cans of beer per day
- Glasses of wine per day
- Drinks or shots of other alcoholic beverages
per day
- Packs of cigarettes per day
- Cigars per day
- Pipes per day
- Chews of smokeless tobacco per day

19. The number of times that I have used any
 non-legal drug within the last three months:

II. Chronology

On the following pages, please provide a list of your positive and negative life experience, including the specific experiences that are the reasons for you forensic examination. As in the sample below, start with the time six months before the reasons for the legal matter began. Continue listing life experiences up to the present day. For example, if you experienced harassment starting in September of 1996, you would list all your significant or meaningful life experiences starting from six months prior, which would have been March of 1996, and would continue your list to the present day.

As in the sample below, list each experience in approximation chronological order. Remember, this is *only a brief listing* for discussion later. Use only one line to identify each experience. *Do not write more than one line for any individual event.* If you do not have enough lines, feel free to copy and attach additional blank pages as necessary. Star (*) any line that you especially wish to discuss with the examiner.

In your list, consider positive life experience in such as a graduation; falling in love; any award or special recognition; the birth of a child; purchasing a home; participating in a special event; vacation; completing a task or commitment; mastering a skill or challenge; building or creating something; quitting an addiction or bad habit; gaining a friend, teacher, or therapist; wining at gambling; financial or employment success; or any other pleasurable moment alone or with your family, friends, or others. Also consider experiences such as marital difficulty; relationship separation; miscarriage or abortion; parent-child problem; financial difficulty; gambling loss; job demotion or loss; unfair job treatment; using a potentially harmful substance; personal or professional rejection; period of stress; vehicle accident; loss of a friend; legal problem; theft; fire; harassment, abuse, or other assault; other physical or psychological or emotional problem; or any other concern about yourself or a loved one.

DATE	[SAMPLE OF ONE LINE ENTRIES] One Line Brief Listing of Each Experience, Event, or Incident
3/1/96	Began work at Excelsior Fabricating as shipping department shift leader
6/12/96	Promoted to department supervisor; large raise; great performance evaluations; told I have "promise"
7/1/96	Purchased new house; wonderful; happy
7/24/96	My mother hospitalized briefly; recovers fully after three weeks; stress, then relief
9/1/96	Supervisor at work asks if I am married; comments flatteringly on my attractiveness; asks me out; makes me feel uncomfortable
9/3/96	I slip on grease at work in early morning while going around box left in corridor
9/3/96	Complain to supervisor about pain; says important deadline that afternoon and that I may not leave work
9/4/96	Call in sick; my physician says I have a cracked rib and strained cartilage
9/12/96	Return to work on crutches; unrequested, the supervisor helps me sit down and 'accidentally' touches my breast in the process
	[subsequent events...]

APPROXIMATE DATE	ONE LINE BRIEF LISITING OF EACH EXPERIENCE, EVENT, OR INCIDENT [Feel free to attach extra pages to this part, if needed, but please remember that this is
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III. CHANGES IN FEELING, THINKING, AND BEHAVING

1. Think about how you were in the three months before the start of the event(s) or incident(s) in question. Then indicate (x) below how you have been since. Check whether you have been substantially “more”, about the “same”, or substantially “less” in each way since that time. Also feel free to add descriptors of your own.

Compared to before, I have been....	Compared to before, I have been....	Compared to before, I have been....
More Same Less	More Same Less	More Same Less
Happy.....	Empty.....	Nightmares.....
Optimistic.....	Alone.....	Night sweats.....
Patient.....	Tense or Anxious...	Sleepless.....
Gentle.....	Worried.....	Sleeping more.....
Calm.....	Fearful.....	Sad or Unhappy.....
Alert.....	Easily upset.....	Pessimistic.....
Focused.....	Fragile.....	Crying, tearful.....
Thoughtful.....	Perfectionist.....	Feelings of Guilt.....
Energetic.....	Cold hands/feet.....	Poor Appetite.....
Confident.....	Light-headed.....	Disturbing Thoughts
Assertive.....	Restless.....	Disinterest in People
Open.....	Agitated.....	Low energy.....
Productive.....	Frustrated.....	Unmotivated.....
Effective.....	Short of Breath.....	Helpless, Powerless.
Cooperative.....	Weight loss.....	Useless.....
Sociable.....	Weight gain.....	Controlling.....
Stable.....	Panic feeling.....	Demanding.....
Resilient.....	Forgetful.....	Cautious.....
Reserved.....	Disoriented.....	Untrusting.....
Shy.....	Can't Concentrate...	Irritable.....
Uncomfortable.....	Confused.....	Bitter.....
Self-conscious.....	Headaches.....	Resentful.....
Distant.....	Restless Sleep.....	Moody.....

Thank you for completing this portion of the Forensic History Questionnaire.

Feel free to copy the completed Questionnaire before you return it to the forensic examiner.