



Registration form

V1.4

We ask you to complete the registration form as completely as possible. On the one hand, your information is used by the consultants to prepare for the talks. On the other hand, it is the basis for anonymous statistical evaluations that serve quality assurance.

All information will be treated strictly confidential.

• Visiting address
• Psychotherapeutic
Counselling Centre
Friedrichstraße 21
72072 Tübingen
• 07071/253960
pbs-stuwe@
sw-tuebingen-hohenheim.de

Personal Data

Today's date: _____

First and last name: _____

Gender: female male diverse

Street: _____

Postal Code and city: _____

Date of birth: _____

Place of birth: _____

Nationality: _____

Marital status: single
 married, registered partnership
 divorced
 in partnership - partner at the place of study
 in partnership - partner not at the study place

① Multiple
answers
possible

Children: no yes ____ (number)

Living arrangements:
 alone
 Flat-sharing community
 Hall of residence
 with partner
 with children
 with parents (one of both)
 other form of living: _____

① Multiple
answers
possible

① Please register only the contact details, the use of which you also agree to by the Counselling Centre (for example for announcing possible date changes):

Landline no.: _____

Mobile no.: _____

E-Mail: _____



School & Studies

Graduation: High School
 Fachhochschulreife (university of applied sciences entrance qualification)
 other: _____

Before studies: Voluntary service
 National service
 Training: _____
If training: completed not completed
 Other activities: _____

University: University of Tübingen
 University of Hohenheim
 Reutlingen University
 University of Albstadt-Sigmaringen
 University of Forestry Rottenburg
 Other: _____

Major subject(s): _____

Minor field(s) of study: _____

Final goal: Bachelor
 Master
 Doctorate
 Diploma
 State examination with teaching activity
 State examination without teaching activity (e.g. medicine, law)
 other: _____

① **University semesters** are all semesters you were enrolled at a university. **Specialist semesters** are all semesters in the current subject. If necessary, include the semesters of an underlying study.
Example: You first studied biology for 2 semesters, but did not finish this course. You then studied Psychology 8 semesters (Bachelor) and are now in the 2nd semester Psychology (Master).
⇒ Enter 12 study semesters and 10 specialist semesters.

University semesters: _____ **Specialist semesters:** _____

Since when (month/year) have you been at the current place of study? _____

Did you change the subject of studies?

no
If, yes:
previous subject(s): _____
 not completed completed



When is the next exam? _____ Which? _____

Which occupation do you want to practice later?

still undefined

Family background

Information about your parents:

	Age	Highest level of education	Occupation learned	current activity
Mother				
Father				

Parents are: married
 unmarried
 separated since _____
 divorced since _____

Has a parent died?

no

If, yes:

Mother - when? _____ Father - when? _____

Do you have siblings?

no

If, yes:

Gender	Age	Highest level of education	Career/Job
<input type="checkbox"/> f <input type="checkbox"/> m <input type="checkbox"/> d			
<input type="checkbox"/> f <input type="checkbox"/> m <input type="checkbox"/> d			
<input type="checkbox"/> f <input type="checkbox"/> m <input type="checkbox"/> d			

How often do you visit your parents or home? _____



Financial situation

How do you pay for your studies?

Source	Scope
Parents (one or both)	<input type="checkbox"/> partially <input type="checkbox"/> full
BAFöG [Federal Law on Support in Education]	<input type="checkbox"/> partially <input type="checkbox"/> full
Scholarship: _____	<input type="checkbox"/> partially <input type="checkbox"/> full
own work: _____	<input type="checkbox"/> partially <input type="checkbox"/> full
other source: _____	<input type="checkbox"/> partially <input type="checkbox"/> full

Do you see the subsistence of your studies endangered?

- no
 yes

Health

Do you or did you have severe physical or mental illnesses?

- no
If, yes:

When?	Which illness?

Do you take medication on a regular basis?

- no
If, yes:

Medication	Dosage

Have you ever been in psychological counselling or psychiatric or psychotherapeutic treatment?

- no
If, yes:

When?	Which counselling/treatment?	How often?
		<input type="checkbox"/> ≤10 <input type="checkbox"/> > 10
		<input type="checkbox"/> ≤10 <input type="checkbox"/> > 10
		<input type="checkbox"/> ≤10 <input type="checkbox"/> > 10



Occasion & access to counselling

What are the issues you contact the Counselling Service for?

① Multiple
answers
possible

- Work organization, time management
- Learning and work difficulties, performance problems
- Examination anxiety
- Speech inhibition
- Writers block
- Study choice, drop-out
- Problems finishing studies
- Identity problems, self-esteem problems
- Problems with the parents, with the family environment
- Contact problems, problems in groups
- Partnership problems
- Problems with the social/professional future
- Problems with migration, with cultural identity
- Stress management problems, exhaustion
- Sexual problems, sexual orientation
- Anxiety
- Depression
- Eating disorders
- Substance abuse, addiction problems
- Suicidality
- Physical illness, psychosomatic complaints
- Psychiatric disorder
- other: _____

How did you become aware of the Counselling Service?

① Multiple
answers
possible

Media:

- StuWe Compass
- Newspaper
- Course directory
- Poster
- Internet
- other: _____

Person(s):

- Partner
- Parents
- Friend, acquaintance
- Fellow student
- Instructor
- Student advisor
- Doctor, Psychologist
- other: _____



Feeling & satisfaction

① Orient yourself in the evaluation of the statements **on the last seven days**.

How healthy and able to work do you feel currently?

not at all very much

How well are you getting along with yourself right now?

very poorly very well

How well are you coping with others right now?

very poorly very well

How satisfied are you with your life at the moment?

very dissatisfied very satisfied

How satisfied are you with your academic achievements?

very dissatisfied very satisfied

How satisfied are you currently with your personal study situation?

very dissatisfied very satisfied

How satisfied are you currently with your study environment?

very dissatisfied very satisfied