DEMOGRAPHIC INFORMATION

Sanctuary Counseling Group is in the process of seeking grants to aid in our funding as a non-profit organization. Often, grant applications must be accompanied by demographic information about our patients. We would appreciate it if you would complete this form. It is an anonymous form, will not be placed in your chart, and is used only to collect demographic information. Thank you for your help.

									NSELING GR		1	
Male	Fema	ale Oth	er (10-1	19 20	0-29	30-39	40-49	50-59	60-69	70+	
									NG GROUP			
African-American		As	sian	Cauca	sian	Hispanic		Nati	Native American		Other	
ANNUAL.	HOUS	EHOLD IN	ICOME f	or your far	nilv							
< \$10,000		\$10,000-\$24,000		\$25,000-\$49,000		\$50,000-\$74,00		\$75,000-\$99,000		>\$100,000		
									NG GROUP?		1-4	
<u>-</u> -		Insurance or Insurar		Internet or SCG Website		Pastor or Church Staff		ian or cian's	Psycholog Today		Relative or Friend	
Resource		Website	!				Óffice*		-			
*REFERRAL SOURCE B: If referred by a physician or physician's office, which medical group?												
Carolina Medical Center		Novant Healthcare			Other		•	Do Not Know		ow		
FAITH: Which best descri Atheist Agnostic					Catholic		Episcopalian		lox	Hindu		
				-			Unitarian		0.1			
Jewisn	Jewish Metho		st	Muslim		Presbyterian		rian	Other			
SPIRITUA	I./RFI	IGIOUS:	Which b	est describ	es the n	ature o	f vour fa	ith?				
Religious		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Spiritual	00 (110 12	Religious and Sp			l Neither	Neither Religious nor Spiritual			
CHURCH:	: If yo	u attend o	or belon	g to church	ı, please	write t	he name	of the	church here	. <u>.</u>		
EADIVE	VDED II	ENICES: D	d von a	moniones	mr of 41	ao follo-	wing DE	ODE T	HE ACE OF	102		
	Physical Abuse			d you experience any of the Sexual Abuse			Physical or Emotional			Witnessing Domestic		
						Abuse				Violence		
			<u> </u>									

THANK YOU!

Sanctuary Counseling Group welcomes all regardless of age, race, ethnicity, faith or sexual orientation.