

Inventory for Parents

Brennen Therapy Forms

1. What incident(s) led you to come to therapy?

2. Are you happy being a parent?

3. Generally, what frustrates you about being a parent?

4. Do you feel that you have the necessary skills to be an effective parent?

5. Are you overwhelmed with life situations? *Explain.*

6. Do you take the time to talk, have fun, and go on dates with your child? What was the last time you did so?
