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## RECORD OF INDIVIDUAL COUNSELING

### I. COUNSELING TIPS

- |   |  |
|---|--|
| <p>1. Determine the objective of the counseling before the session begins.</p> <p>2. Hear the individual out.</p> <p>3. Treat the member as having worth and dignity.</p> <p>4. Show sincerity, courtesy, and personal interest in the individual.</p> <p>5. Give the individual the facts, whether they are pleasant or unpleasant.</p> <p>6. Don't brush off any problem as being too trivial.</p> <p>7. Don't make snap decisions.</p> | <p>8. Don't make promises if you can't keep them.</p> <p>9. Don't force decisions on the person - there may be other equally good and acceptable solutions.</p> <p>10. Refer to other agencies.</p> <p>11. Make contact for the individual with the referral agency.</p> <p>12. Follow up referrals to make sure there is a continuity of action and that referrals are completed as soon as possible.</p> |
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### II. PERSONAL DATA

1. NAME (Last, First, MI)	2. GRADE	3. SSN	4. AFSC	5. DUTY PHONE
6. UNIT/OFFICE SYMBOL	7. REASON FOR COUNSELING		8. OTHER INFORMATION (i.e., marital status, course graduation date, date assigned, etc.)	

### III. COUNSELING

9. SUMMARY OF COUNSELING (Give details, facts, specific dates, times, names, sequence of events, etc.)

10. RECOMMENDATIONS AND ADVICE OF COUNSELOR

11. NAME, GRADE AND DUTY TITLE OF COUNSELOR

12. SIGNATURE

13. DATE

**IV. ACKNOWLEDGMENT OF COUNSELING**

14. SUMMARY OF COUNSELEE'S COMMENTS (Indicate if none)

15. NAME AND GRADE OF COUNSELEE

16. SIGNATURE

17. DATE

**V. REFERRAL/FOLLOW-UP**

18. REFERRAL AGENCIES RECOMMENDED (Personal Affairs, Chaplain, Legal Assistance, Medical, Social Actions, Red Cross, etc.)

**VI. COMMANDER'S COMMENTS**

19. NAME AND GRADE OF COMMANDER

20. SIGNATURE

21. DATE