



UNIVERSITY OF
NOTRE DAME

UNIVERSITY COUNSELING CENTER

Student Questionnaire

Please review the following questions. Attach your responses to this form and return both to: University Counseling Center, Attention: Amy Spanopoulos, LCSW, Associate Director, Clinical Services, P.O. Box 709, University of Notre Dame, Notre Dame, IN 46556-0709.

Print Your Name: _____

Current Address: _____

Current Phone Number: _____ Current E-Mail Address: _____

Signature: _____

Last date of attendance at the University: _____

Applying to return _____ Fall _____ Spring _____ Summer _____ Year

Today's Date: _____

1. Please describe the circumstances involved in your decision to leave the University.
2. How have you addressed and resolved those issues that precipitated your leave?
3. Please describe why you feel you are ready to return to the University.
4. Please describe what steps you will take to assist you in your return to the University and the pressures of academic work, on/off campus living, social life, athletic and/or organizational commitments, etc.
5. Do you feel that you need additional treatment when you return to the University? If yes, please share your thoughts about what treatment or services might best support your return (e.g. individual counseling, medication management, group therapy, AA meetings, other on campus support, etc.)? If you feel you do not need treatment at this time, why not?

Thank you for taking the time to provide your thoughtful perspective as we review your application.

The University Counseling Center (UCC) offers drop-in appointments Mondays, Thursdays & Fridays, 9:00 am – 4:00 pm ET and Tuesdays & Wednesdays 1:00 pm – 4:00 pm ET. Students complete academic year paperwork each year. The Drop-In counselor will review your paperwork and work with you to determine treatment recommendations according to a stepped care model.

Reviewed 9/21/2020