



## Biblical Counseling Ministry

### ***Welcome***

Dear Friend,

Welcome to Oak Grove Biblical Counseling, a ministry of Oak Grove Church. We desire to be used by God to speak his truth in love. We know the path to maturity is often steep and rough and at times, filled with pain and confusion. However, there are answers. We believe the Bible is God's all-sufficient guide for relational living. There is a route to life. Our Lord is that Way. Christ is the Truth who frees us to love. He is the Life who satisfies the deepest thirsts of our soul. Our goal is to help you meet the challenges of life in a way that will please and honor the Lord Jesus Christ (1 Cor. 10:31) and allow you to fully enjoy His love for you and His plans for your life (John 15:11).

### **OUR MISSION**

Helping those struggling by providing hope and healing through God's sufficient Word, with Spirit-led wisdom and guidance from counselors aiming to be wholehearted followers of Christ.

### **GENERAL COUNSELING INFORMATION**

As a ministry of Oak Grove Church, our biblical counseling services are **free**. As a discipleship ministry of a local church, we offer to you:

- Individual biblical counseling regarding spiritual and personal issues.
  - Biblical counseling for specific issues such as, but not limited to the following: substance abuse, domestic abuse (abused and abuser), depression/anxiety, self harm, eating disorders, and unplanned pregnancies.
- Premarital and marital biblical counseling
- Family/parental biblical counseling: with children under the age of thirteen, we work primarily with the parents and/or with the parents and children together.
- Adolescent biblical counseling: with parental consent and involvement
- Financial biblical counseling

### **FINANCIAL RESPONSIBILITIES**

Part of the weekly biblical counseling homework assignments will usually require the purchase of materials that correspond to the discipleship. Those materials are yours to keep. The actual biblical counseling is free of charge as a ministry of Oak Grove Church.

### **APPOINTMENTS**

Our biblical counselors work by scheduled appointments only. In emergencies, exceptions can and will be made. We need your prompt and persistent participation for each of your scheduled appointments to meet with your counselor. Please call 319-214-5795 at least 24 hours in advance if you must cancel an appointment. This will allow us to schedule another individual during this time. We can not guarantee you will be able to reschedule any missed appointments, but will keep your next regularly scheduled appointment, if proper notice is given when cancellation is necessary.

## OUR COMMITMENT TO YOU

We would like to explain what we mean by *biblical counseling*. Biblical counselors are spiritual friends committed to the historic church roles of soul care and *spiritual direction* through:

- **Sustaining:** Empathizing with your suffering, helping you to understand that “*it’s normal to hurt.*”
- **Healing:** Encouraging you to see life from a biblical perspective, helping you to know that “*it’s possible to hope.*”
- **Reconciling:** Examining and exposing your current responses to life and suggesting new ways of handling problems, helping you to see that “*it’s horrible to sin but wonderful to be forgiven.*”
- **Guiding:** Empowering you to mature through Christ and helping you to grasp that “*it’s supernatural to mature.*”

Because we care about **you**, our desire is for you to be drawn closer to Christ and to become more like Christ, which we see as *your life increasingly reflecting the life of Christ*:

- **Relational Maturity:** Loving God wholeheartedly and loving others sacrificially.
- **Rational Maturity:** Wisely living according to the truth of Christ’s gospel of grace.
- **Volitional Maturity:** Courageously choosing to pursue God’s purposes in your life through the power of the Holy Spirit.
- **Emotional Maturity:** Deeply and honestly experiencing life with integrity, fully open to God while managing your moods for God’s glory and with a ministry focus.

## YOUR COMMITMENT TO CHRIST, YOURSELF, and US

We ask that you commit to:

- Honestly and openly sharing your hurts and struggles.
- Evaluating your own emotions, actions, motivations, beliefs, and relationships.
- Actively participating in the growth of renewed emotions, actions, convictions, and desires.
- Coming to each meeting prepared to review your progress throughout the last week (including the completion of personalized “homework” assignments) and prepared to share your goals for the present meeting.

Because the Bible teaches that growth in Christ requires all the resources of the body of Christ (i.e. discipleship, worship, fellowship, stewardship, and ambassadorship, in addition to biblical counseling), we believe it is essential that those seeking biblical counseling at our church commit to the following:

- Regular church attendance (at your church or our church).
- Active participation in an adult Bible study, Community Group, Journey Group, or Sunday School.
- Having an advocate relationship with a person of your same sex to help you as you go through counseling (see Advocacy Form for more information).

We ask you sign below to indicate your understanding of, agreement with, and commitment to Oak Grove Biblical Counseling Ministry as described on these pages.

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Signature

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Printed Name or Name of Minor

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Date



## Biblical Counseling Ministry

### ***Consent to Biblical Counseling***

#### **OUR APPROACH**

Biblical Basis: We believe the Bible provides thorough guidance and instruction for faith and a life that is pleasing to God (2 Tim 3:16-17; 2 Pet 1:3ff). Therefore, our biblical counseling is based upon scriptural principles rather than those of secular psychology or psychiatry. **In order to support this conviction, we ask all of those we counsel to be regular attendees to a Sunday morning worship service while you are in counseling, either with us at Oak Grove, or at the church of your membership.**

Not Professional Advice: Although some of the pastoral or lay counselors of Oak Grove Church may be trained or licensed in other fields, such as medicine, psychology, or psychiatry, they will not practice in that capacity but only as biblical discipleship counselors under the authority of the Elders of Oak Grove Church. As such, if you have significant legal, financial, medical or other technical questions, you should seek advice from an independent professional. Our ministry staff and lay counselors will be happy to cooperate with such advisors and help you to consider their counsel in light of relevant scriptural principles. Our pastors and discipleship counselors do not give professional advice.

#### **CONFIDENTIALITY**

At Oak Grove Church, we desire to grow in caring for those in our flock who are hurting. It is imperative to our mission and your long-term care that we stay in consistent and regular communication with the leadership of Oak Grove Church (elders, pastoral staff, and biblical counseling leadership) and/or the person you have designated/chosen/agreed to as your advocate. This form gives us permission to discuss what we deem to be the necessary information regarding your situation with the appropriate and concerned parties in accordance with the confidentiality guidelines explained below. Please read the following information carefully.

Confidentiality is an important aspect of the biblical counseling relationship and we will carefully guard the information you entrust to us. All communications between you and our OGBC Ministry Team will be held in strict confidence unless you (or a parent in the case of a minor) give authorization to release this information. The exceptions to this would be:

1. If a person expresses an intent to harm him/herself or someone else.
2. If there is evidence or reasonable suspicion of abuse against a minor child, elder adult, or dependent adult.
3. If a subpoena or other court order is received directing the disclosure of information.
4. In discussions with the elders, pastoral staff or biblical counseling leadership of Oak Grove Church, previous counselor(s), and/or your advocate for the sole purpose of gaining information for your care or to help in follow up and after care.
5. When a counselor is uncertain of how to address a particular problem and needs to seek advice and wisdom from an Oak Grove Church elder, pastoral staff, or biblical counseling leader.
6. If a person persistently refuses to renounce a particular sin (habitual unrepentant rebellion against God's Word) and it becomes necessary to seek the assistance of others in the church to encourage repentance, restoration, and reconciliation (Prov 15:22; 24:11; Matt 18:15-20) and Oak Grove Church Discipline Policy.

In all situations, we will make every effort to be sensitive to your situation. Please be assured, our counselors strongly prefer not to disclose any of this personal information to others. We will strive to help you resolve the difficult situations you are experiencing as discretely as possible.

## **RESOLUTION OF CONFLICTS**

On rare occasions, a conflict may develop between a counselor and a counselee. In order to make sure any such conflicts are resolved in a Biblical manner, we require all counsees to agree any dispute arising with a counselor or with Oak Grove Church staff, as a result of counseling, will be settled by mediation under the leadership of Oak Grove Church. The undersigned hereby expressly waives any right to maintain a civil action/suit against Oak Grove Church by virtue of the counseling services provided, or any action related thereto. We will make every effort to resolve conflict in a manner according to the principles of scripture (1 Cor 6-7).

## **RELEASE OF LIABILITY / COVENANT NOT TO SUE**

The undersigned do now remise, release, acquit, satisfy and forever discharge Oak Grove Church and their officers, directors, agents, employees, independent contractors, counselors, volunteers, successors and assigns and other persons or any other party involved in or related to biblical counseling services from all actions, causes of action, suits, damages, judgements, executions, claims and demands whatsoever in law or in equity, which the undersigned may ever had, now have or may have in the future, or which any personal representative, successor, heir or assign of the undersigned in the future can, shall or may have, for any reason or out of or relating in any fashion whatsoever to the undersigned participation in biblical counseling or any action pursuant to biblical counseling, whether caused by negligence or otherwise.

The undersigned covenants not to sue or otherwise assert a claim of any nature whatsoever against Oak Grove Church, its counselors, officers, directors, volunteers, or employees arising out of or in any way related to the undersigned's involvement in Biblical counseling. By signing this *Consent to Counsel* you agree to hold Oak Grove Church harmless in any and all matters associated with the biblical advice you have received.

## **CONCLUSION & SIGNATURE**

Having clarified the principles and policies of our discipleship counseling ministry, we welcome the opportunity to minister to you in the name of Christ and to be used by Him as He helps you to grow in spiritual maturity and prepares you for usefulness in His body. If you have any questions about these guidelines or conditions, please speak with our pastor or a member of the Oak Grove Biblical Counseling Leadership Team.

Having read the above information and conditions fully and completely, my signature below indicates that I understand all the material presented and fully agree to comply.

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Signature

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Printed Name or Name of Minor

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Date



## Biblical Counseling Ministry

### ***Advocates in Biblical Counseling***

The next steps involve bringing in advocates to walk alongside you during this time. Simply put, an advocate is someone who loves God, loves God's Word and loves and/or cares about you.

The addition of a trusted friend, house church member, or mentor has shown to increase the effectiveness of counseling significantly. They will walk alongside you through the counseling process and continue to help you after the counseling is over. Ideally the person is part of your day-to-day community and attends church at Oak Grove Church (OGC) and can receive an endorsement from leaders at OGC.

Before giving us information below on who you will be contacting to serve as your advocate, please take some time to read through the following information to gain a better understanding of what we mean by advocacy.

#### **The Vital Role of an Advocate**

- It's a privilege to be an advocate and stand in the gap for your friend or loved one during their time of need (Pr 17:17).
- One does not need extensive counseling training or schooling to be an advocate (2 Cor 1:3-5).
- Mutual ministry encourages growth in everyone involved (Heb 3:12-13).
- It's God's design to counsel in community (Gal 6:1-2).

#### **Responsibilities of an Advocate During Counseling**

During the time as advocate, people will have a variety of opportunities to learn, grow and serve. Below are some specific ways in which we will ask the advocate to serve.

- Offer intercessory prayer (Romans 12:11-12, Jeremiah 33:3).
- Provide insights and perspective for the counselor (Pr 18:17).
- Witness to what God is doing (Mark 2:1-12, 2 Tim 2:24-26).
- Help the counselee apply what they are learning in between sessions (Gal 6:1-2).
- Become a bridge for the counselee to get connected back into community (Hebrews 3:12-13).
- Decrease loneliness and isolation of the counselee (Pr 18:1, Heb 10:24-25).
- Stand as an ambassador for Biblical Soul Care (2 Cor 1:3-5 and 5:14-21).

#### **Benefits to the Counselee**

- Hope and help as a friend who walks through the valley.
- Continuity of counseling and help to the counselee throughout the weeks.
- Help communicating greater context, to bring to remembrance key issues and/or remind them of truth gained while in counseling.
- Freedom to be attentive without the need to capture every detail.

#### **Benefits to the Advocate**

- Deeper insight into the life of the person they love.
- Weekly direction for conversation and accountability.

- An opportunity to ask questions and receive insight.
- An opportunity to fulfill the law of Christ (Gal 6:1-2).
- A practical way to apply the *one anothers* of Scripture.
- An opportunity for further training / equipping.
- Personal growth in closing the gaps between knowing Scripture and living it.

**Benefits to the Counselor**

- Another perspective into life of the counselee.
- Built-in accountability for homework and application.
- Validation or clarification of heart issues.
- Help assimilating into the regular flow of discipleship at Oak Grove Church.

**Benefits to the Local Church**

- A person is trained to support a body member in a short period of time.
- Creates a support network for Pastors and ministry leaders.
- Built-in accountability for the church’s counseling ministry.
- A testimony of love and commitment to one another and a watching world.

I have read and understood the information above entitled "Advocacy."

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

The person I will ask to serve as my advocate:

Advocate First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Advocate Email: \_\_\_\_\_

Advocate Phone: \_\_\_\_\_

Text OK? \_\_\_\_\_ (Y) \_\_\_\_\_ (N)



Biblical Counseling Ministry  
***Personal Data Inventory***

Please complete **ALL** sections completely, accurately, and honestly. Do not leave any item unanswered (if not applicable, write "N/A"). When completed please either **email to biblicalcounseling@oakgrove.cc** (bring original with you at your first meeting), or deliver to the church office.

### IDENTIFICATION INFORMATION

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ DOB: \_\_\_\_\_

Text OK at above number?  Yes  No Email: \_\_\_\_\_

Gender: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Highest Level of Education Achieved: \_\_\_\_\_

Employer: \_\_\_\_\_

Work Schedule: \_\_\_\_\_

Referred By: \_\_\_\_\_

### REASON FOR SEEKING BIBLICAL COUNSELING

Why do you desire to meet with a biblical counselor? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How long has this issue existed? \_\_\_\_\_

Were there any significant events occurring in your life/family's life when this issue began? \_\_\_\_\_

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Who have you spoken to regarding this issue and what has happened as a result? \_\_\_\_\_

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What have **you** done about this issue? \_\_\_\_\_

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How would things be different for you if the issue were remedied? \_\_\_\_\_

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What are your expectations in coming to counseling? How do you think we can help you? What results are you expecting in coming here for biblical counseling? \_\_\_\_\_

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In what way(s) have **you** contributed to the problem? \_\_\_\_\_

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## MARRIAGE & FAMILY

How many siblings do you have and which number are you in the order? \_\_\_\_\_

What is your parents' marital status? \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Spouse's Email: \_\_\_\_\_ Text OK at above number?  Yes  No

Spouse's Address (if different than above): \_\_\_\_\_



City: \_\_\_\_\_ Zip: \_\_\_\_\_

Spouse's Highest Level of Education Achieved: \_\_\_\_\_

Spouse's Employer: \_\_\_\_\_

Spouse's Work Schedule: \_\_\_\_\_

Date of Marriage: \_\_\_\_\_ Age When Married: (H) \_\_\_\_\_ (W) \_\_\_\_\_

Length of acquaintance before committing to exclusive dating? \_\_\_\_\_

Length of exclusive dating and/or engagement before marriage? \_\_\_\_\_

Is your spouse willing to come for counseling?  Yes  No  Uncertain

Have you ever been separated from your spouse?  Yes  No If yes, when/length: \_\_\_\_\_

Have either of you ever filed for divorce?  Yes  No If yes, when/date: \_\_\_\_\_

Give a brief description of any previous marriage(s): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How many siblings does your spouse have and which number is s/he in the order? \_\_\_\_\_

What is your spouse's parents' marital status? \_\_\_\_\_

**CHILDREN**

PM*	Name	Age	Gender	Education / Grade	Marital Status

\* Check this column (PM) if the child is from a previous marriage.

**PARENTING**

What type of instruction in Christian living is given in your home and by whom? \_\_\_\_\_

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Who does the disciplining in your home? \_\_\_\_\_

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For what behaviors are your children disciplined? \_\_\_\_\_

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What methods of discipline are currently being used? \_\_\_\_\_

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How do you and your family members communicate love to each other? \_\_\_\_\_

## PERSONALITY

Check **any** of the following words that best describe you **now** (cont'd on next page):

- |                                      |   |                                      |                                     |                                     |
|--------------------------------------|---|--------------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Active      | <input type="checkbox"/> Hardworking    | <input type="checkbox"/> Shy         | <input type="checkbox"/> Leader     | <input type="checkbox"/> Compulsive |
| <input type="checkbox"/> Nervous     | <input type="checkbox"/> Likable        | <input type="checkbox"/> Impulsive   | <input type="checkbox"/> Follower   | <input type="checkbox"/> Excitable  |
| <input type="checkbox"/> Impatient   | <input type="checkbox"/> Self-Conscious | <input type="checkbox"/> Often Blue  | <input type="checkbox"/> Sarcastic  | <input type="checkbox"/> Serious    |
| <input type="checkbox"/> Moody       | <input type="checkbox"/> Jealous        | <input type="checkbox"/> Calm        | <input type="checkbox"/> Ambitious  | <input type="checkbox"/> Easygoing  |
| <input type="checkbox"/> Imaginative | <input type="checkbox"/> Self-Confident | <input type="checkbox"/> Extroverted | <input type="checkbox"/> Persistent | <input type="checkbox"/> Quiet      |
| <input type="checkbox"/> Introverted | <input type="checkbox"/> Good-Natured   | <input type="checkbox"/> Fearful     | <input type="checkbox"/> Loner      | <input type="checkbox"/> Stubborn   |

Any other descriptions? \_\_\_\_\_

### Complete the following sentences:

People who know me think that I am: \_\_\_\_\_

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If they knew the “real me,” they would know that I am: \_\_\_\_\_

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What I desire more than anything else in life is: \_\_\_\_\_

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What I fear most in life is: \_\_\_\_\_

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The person I admire most in life is: \_\_\_\_\_

Because: \_\_\_\_\_

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Is there any other information you would like us to know? \_\_\_\_\_

## HEALTH

Rate your health:  Excellent     Good     Fair/Avg     Poor

Weight changes recently:  None     Lost (\_\_\_\_\_ lbs)     Gain (\_\_\_\_\_ lbs)    Since (date): \_\_\_\_\_

List all important (present or past) illnesses, injuries, or disabilities: \_\_\_\_\_

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Date of last medical exam: \_\_\_\_\_

\*Physician: \_\_\_\_\_

Phone: \_\_\_\_\_

**\*We will not contact him/her without your permission via a consent to release information release form.**

Please list any medication(s) you are presently taking:

Name	Strength	Dose

Have you used any drugs for other than medical purposes:  Yes  No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Have you ever had any counseling before:  Yes  No

If yes, when? \_\_\_\_\_

Where/With Whom? \_\_\_\_\_

For what purpose? \_\_\_\_\_

Do you believe that issue was fully resolved?  Yes  No      Do you have any problems sleeping?  Yes  No

If yes, please explain, including any methods used to address the issue: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If determined necessary, are you willing to sign a release so your biblical counselor may write for medical or counseling reports from your current or previous providers?  Yes  No

## RELIGIOUS BACKGROUND

What church do you attend: \_\_\_\_\_

How often do you attend: \_\_\_\_\_ per \_\_\_\_\_  
times week, month, year

Are you a member:  Yes  No

Do you consider yourself a religious person?  Yes  No  Uncertain

Do you believe in God?  Yes  No  Uncertain

Do you believe Satan exists?  Yes  No  Uncertain

Have you ever "dabbled" with the "Occult" (Seances, devil worship, witchcraft, etc.)?  Yes  No  Uncertain

If yes, please describe: \_\_\_\_\_

Would you consider yourself a Christian?  Yes  No  Uncertain

Or would you say you are still in the process of becoming Christian?  Yes  No  Uncertain

What ministries/activities are you involved in at church and what is your role? \_\_\_\_\_

How often do you read the Bible? \_\_\_\_\_

Do you have a regular time of devotions?  Yes  No  Uncertain

How often do you pray? \_\_\_\_\_

Describe your relationship with Christ: \_\_\_\_\_

What church did you attend as a child? \_\_\_\_\_

What was your religious experience as a child? What was your home environment like in regard to Christianity, the Bible, and the Church? \_\_\_\_\_

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Explain any recent changes (if any) in your religious life? \_\_\_\_\_

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Religious background of spouse: \_\_\_\_\_

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**OTHER**

Have you ever been arrested?  Yes  No If yes, please describe: \_\_\_\_\_

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Have you ever suffered the loss of someone who was close to you?  Yes  No If yes, please describe:

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Have you ever had a problem with alcohol or drug abuse (prescription or non-prescription)?  Yes  No

If yes, please describe: \_\_\_\_\_

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Have you ever had a severe emotional upset?  Yes  No (If yes, please describe below.)

Have you ever been abused as a child or as an adult (physical, sexually, emotional, etc.)?  Yes  No

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Anything else you would like to add.

\_\_\_\_\_

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