

Please read the following instructions carefully!

- Your application to the Psychological Counseling Unit is confidential and will not be shared with anyone.
- After your application, a meeting time will be created as soon as possible and it will be returned to your university e-mail address.
- Please indicate the most available time, day, and hours for you in the session days and hours section at the end of the application form. It speeds up the process of the session with you. (For example Mon. 15.00, Wednesday 16.00, etc.)
- When you do not come to your first session without notice, you give up your request for help is considered. In this case, you must repeat your application.
- The decision of frequency and duration of the interviews depends on your needs and expectations, the term, and the availability of the unit.
- In case of emergency, you can come to the PDB during working hours without contact, and out of working hours, you can apply to the nearest health institution.
- You need to fill in the application form and send it to [pdb@istinye.edu.tr](mailto:pdb@istinye.edu.tr) e-mail address.

NAME - SURNAME :

APPLICATION DATE : ..... / ..... /.....

E-MAIL :

PHONE NUMBER :

DATE OF BIRTH :

PLACE OF BIRTH :

SEX :

Fill in the appropriate section for you.

- Student
- Academician
  - FACULTY / VOCATIONAL SCHOOLS / INSTITUTE :
  - DEPARTMENT / PROGRAM :
  - DUTY / TITLE :
  - CLASS :
- Administrative Personnel
  - DIRECTORATE :
  - UNIT :
  - DUTY / TITLE :

Have you received psychological/psychiatric help before?

- Yes
- No

Please briefly explain your reason for applying to the psychological counseling service.

How did you be informed about psychological counseling services?

- Friends
- Referral from the health unit
- Referral from administrative personnel
- Referral from academician
- Other

Please indicate the day and time you want to meet:

Days:

Hours: