

# ACQUAINTANCE FORM

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

Patient Name: \_\_\_\_\_ Single \_\_\_\_\_ Married \_\_\_\_\_ Widowed \_\_\_\_\_ Divorced \_\_\_\_\_

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

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Birth date: \_\_\_\_\_

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

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

Person Responsible for Account: \_\_\_\_\_

Do you have dental insurance? \_\_\_\_\_

How did you hear about Dr.Schwanekamp? \_\_\_\_\_

Whom may we thank for this referral? \_\_\_\_\_

## These are things important to me about my dental health:

(Please Circle One)

- |                |   |  |
|----------------|---|--|
| 1. My mouth is | A.) very comfortable<br>B.) moderately comfortable<br>C.) uncomfortable   | B.) put dentistry for myself and my family low on my priority list<br>C.) it's on my list but hard to find |
| 2. I (I am)    | A.) think the appearance of my mouth is excellent<br>B.) satisfied with the appearance of my mouth<br>C.) dissatisfied with the appearance of my mouth  | 7. I think my present state of dental health is<br>A.) excellent<br>B.) good<br>C.) poor                   |
| 3. I           | A.) will do anything to keep my natural teeth<br>B.) want to keep my teeth, but have a certain budget of time and money I am willing to spend on them<br>C.) don't care whether I keep my teeth or not                | 8. I aspire to a mouth with<br>A.) excellent health<br>B.) good health<br>C.) poor health                  |
| 4. I           | A.) have set goals for my oral health with a previous dentist<br>B.) want to set goals concerning my dental health<br>C.) never set goals concerning my dental health   | 9. What is/are your primary concerns?<br>_____<br>_____<br>_____<br>_____                                  |
| 5. I           | A.) have always done the best that was recommended for my dental health<br>B.) have not done what dentists have recommended for my mouth<br>C.) rarely go, and don't care much about having my dental work completed. |  |
| 6. I have      | A.) put dentistry for myself and my family high on my priority list   |  |