

The Tobacco Questionnaire

1. What does tobacco do for you? _____

2. What problems does it cause for you? _____

3. When do you have the greatest desire to use tobacco? _____

4. How much tobacco do you use per day? _____

5. When did you first start using tobacco? _____

Why? _____

6. What benefits do you get as a result of using tobacco? _____

7. What benefits do you expect as a result of becoming a non tobacco user
for the rest of your life?

8. What percentage of you wants to QUIT using tobacco? _____ Why?

9. What percentage wants to CONTINUE using tobacco? _____ Why?

10. Additional comments. _____

My responsibility is to give you suggestions compatible with the achievement of your goals. Your responsibility is to accept those suggestions and to act upon them as suggested. You and only you have the right to make the choices and decisions that affect your life. If your choice, your decision, is to change your life, accept the suggestions consistent with your goal and act upon them, then let's begin!

Signature

Date