

.....
date:

personal feedback form

1

presenting concerns

making changes?

2

good things about smoking

you said:

any others?

3

cannabis and other drug use

cannabis use

Age of first use:

Days used per week:

Days used past 60 days:

Typical amount used daily/weekly:

Usually on (when):

Usually at (where):

Usually with:

Longest period non-use:

Typical amount used past 90 days/year:

Typical amount of money spent
per week/90 days/year: \$

comparing with other people

other drug use

Alcohol use:

Tobacco use:

Other illicit drugs:

early experiences with cannabis and how it
has changed:

what you think of all that:

4

less good things about smoking

you said:

other less good things:

what are the most important risks of cannabis use for you?

5

costs and benefits of changing use

expected costs of reducing smoking:

expected benefits of reducing smoking:

expected costs of increasing smoking:

expected benefits of increasing smoking:

your thoughts on this:

6 important personal goals

list of important personal goals:

1

2

3

4

confidence in your ability to reach your goals:

1

2

3

4

likelihood of achieving goals if you:

Increase use:

Decrease use:

1

1

2

2

3

3

4

4

7 your relationships

concerns:

8

immediate cannabis goals

current short-term goals regarding cannabis:

9

the future?

how do/would you know you are smoking too much?



For more information contact:

National Cannabis
Information and Helpline

1800 30 40 50 (toll free)

Useful websites include the following:

National Cannabis
Prevention and
Information Centre

www.ncpic.org.au

Kids Helpline

(24 hour telephone
service)

1800 55 1800:
www.kidshelp.com.au

Reachout – an interactive
website for young people

www.reachout.com.au

Somazone – a website
by and for young people

www.somazone.com.au