

MANDATORY DISCLOSURE FORM

INFORMATION:

As a counseling client, you are entitled to know your rights:

- You are entitled to receive information about my counseling methods and techniques, the length of counseling, and the cost. Please ask if you have questions. You are also entitled to seek a second opinion at any time.
- I have a M.S.W. (Master of Social Work), which I earned from the University of Denver, School Of Social Work in 2010. I also have a B.A. (Bachelor of Arts) in Sociology from Fairleigh Dickinson University in 2007.
- I am also Licensed Clinical Social Worker in the state of Colorado as a LCSW (Licensed Clinical Social Worker) currently and have been since January 2015. My license number in the state of Colorado is CSW.09923827
- You may request information concerning my training, educational degrees, licenses and credentials.
- You may end counseling at any time, although a closing session is recommended.
- Counseling sessions may be recorded from time to time for supervision purposes only.
- You should know that sexual intimacy between a counselor and client is never appropriate and should be reported to the Grievance Board.
- As a licensed professional in the state of Colorado, my practice as a psychotherapist is regulated by the state. If you have a complaint, let's talk about it. However, another option is to contact the following agency:

Department of Regulatory Agencies
Mental Health Section
1560 Broadway, Suite #1340
Denver, Colorado 80202
(303) 894-7766.
- The Colorado Department of Regulatory Agencies has the general responsibility of regulating the practice of licensed psychologists, licensed social workers, licensed professional counselors, licensed marriage and family therapists, licensed school psychologists practicing outside the school setting, and unlicensed individuals who practice psychotherapy.

CONFIDENTIALITY:

The information you provide during counseling is confidential except as provided in the Mental Health Statute (C.R.S. 12-43-218) such as:

- *If your counselor has reasonable cause to suspect that a child or elder has been abused or neglected
- *If you appear to be at serious risk for hurting yourself or another.
- *If you are involved in a criminal proceeding (i.e charged with a crime)
- *When you or your representative files a lawsuit or grievance against your counselor

By signing this form I acknowledge that I have read the above information and understand my rights as a client and that I have asked any questions I have about this form:

Client Signature

Date
