Curtis J. Birky, Ph.D.

Licensed Masters Social Worker Glenn, MI: 7139 114th St., Glenn, MI Phone & Fax: 269-227-0004 South Bend, IN: 2420 Viridian Drive, South Bend, IN Phone: 574-234-8077 Mail: PO Box 331, Glenn, MI 49416

Contact Information				Date	Date			
Name								
Address								
City				St	Zip			
Phone: Home	Phone: Home Mobile			Work				
Birth Date		Ref	ferred By					
Marital Status	Single	Married	Partnered	Gender	M F	Т		
Physician				Phone				
Medications:								
Previous Counselir	ng? Yes	No	Previous Psyc	hiatric Services?	Yes	No		
Occupation								
Employer								

Are you planning	to use insurance	?	Yes	No	If Yes,	please fill out the	remainder o	of this form
Insured Informa	ition							
Patient Relations	hip to Insured:	Self	Spouse	Ch	ild	Other		
If "Patient Relationship to insured" is other than "Self" please complete the following. If patient is the insured go directly to Insurance Policy Information.								
Insured's Name								
Address								
City						St	Zip	
Phone: Home		Mobil	е			Work		
DOB		Emplo	oyer					
Insurance Policy	/ Information							
Medicare	Medicaid C	ChampUS	Cham	pVA	Gro	oup Health Plan	FECA	Other
Insurance Compa	ny							
Address								
City						St	Zip	
Plan Name								
Policy Number			Group N	Numbo	er			

If patient is covered by another insurance plan as well, please fill out the next section of the form.

Secondary Insurance Policy Information

Medicare	Medicaid	ChampUS	ChampVA	Group Health Plan	FECA	Other
Insurance Compa	any					
Address						
City				St	Zip	
Plan Name						
Policy Number			Group Number			