Wellspring Counseling

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Sliding Scale Application

##### The sliding scale is available to those with demonstrated financial need. To apply for the sliding scale, please complete the information below. If your financial situation changes at a later time, your fee should also be adjusted accordingly. The sliding scale is unavailable for anyone utilizing health insurance for counseling. Self-employed people should use their prior year’s income to apply.

*Note: Application for the sliding scale is optional. If you are not interested in the sliding scale you are not required to complete this form.*

##### Financial Information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Employment Income (gross) $ |  |  | 🞏 monthly | 🞏 yearly |
| Your Spouse or Live-in Partner’s Income (gross) $ |  |  | 🞏 monthly  | 🞏 yearly |
| Other assessable household income(SSI, unemploymt, etc.) $ |  |  | 🞏 monthly  | 🞏 yearly |
| **Total Gross (Before Taxes) Income $** |   |  | 🞏 monthly | 🞏 yearly |
| Total Savings & Investments $ |  |  |  |  |
| Household size income is supporting: |   |  |  |  |

Additional Information you would like to provide:

*The information I have provided above is current and accurate to the best of my knowledge.*

|  |  |  |
| --- | --- | --- |
|  |  |   |

Client’s Signature Date