

## INFORMATION FOR CLIENTS

Welcome to my practice. I appreciate your giving me the opportunity to help to you. This document answers questions that clients often ask about therapy. I believe our work will be most helpful to you when you have a clear idea of what we are trying to do. After you read this, we can talk in person about how these issues apply to you. We will both sign a signature page and you can keep this document for future reference.

### About Psychotherapy

I strongly believe you should feel comfortable with the therapist you choose, and hopeful about the therapy. When you feel this way, therapy is more likely to be very helpful to you. Let me describe how I see therapy.

My theoretical approach to therapy is integrative, meaning I use a variety of techniques and theories. I draw primarily from Cognitive Behavior (CBT), Mindfulness, Insight-Oriented, Compassion-Focused, Attachment-Based, Acceptance and Commitment Therapy (ACT), Internal Family Systems (IFS), Interpersonal Therapy (IPT), and Narrative Therapies. Don't worry if you don't know what any of that means. Just know that I am flexible in my approach based on your unique needs and goals. My style is compassionate, interactive, and collaborative. You can expect me to listen supportively, ask questions, and offer new ways to address your concerns. Therapy is an active process and I enjoy collaborating with each client as a team to reach the goals we have agreed upon.

I view therapy as a partnership between us. You define the problem areas to be worked on; I help you make the changes you want to make. Psychotherapy is not like visiting a medical doctor. It requires your very active involvement. It requires your best efforts to change thoughts, feelings, and behaviors. For example, I want you to tell me about important experiences, what they mean to you, and what strong feelings are involved. This is one of the ways you are an active partner in therapy.

Another important part of your therapy will be practicing new skills that you will learn in our sessions. I may ask you to practice outside our meetings, and we will work together to set up homework assignments for you, if that would be helpful. I might ask you to do exercises, keep records, and read to deepen your learning. You will probably have to work on relationships in your life and make long-term efforts to get the best results. These are important parts of personal change. Change will sometimes be easy and quick, but more often it will be slow and frustrating. There are no instant, painless cures and no "magic pills." However, you can learn new ways of looking at your problems that will be very helpful for changing your feelings, reactions and relationships.

I usually take notes during our first meeting, and sometimes in subsequent sessions.

Most of my clients initially see me once a week; as time goes on, we may decide to change the frequency of sessions. The process of ending therapy can be a very valuable part of our work. Terminating therapy should not be done casually. If you wish to stop therapy at any time, I ask that you agree now to meet then for at least one more session to review our work together.

### **The Benefits and Risks of Therapy**

As with any powerful treatment, there are some risks as well as many benefits with therapy. You should think about both the benefits and risks when making any treatment decisions. For example, in therapy, there is a risk that clients will, for a time, have uncomfortable levels of sadness, guilt, anxiety, anger, frustration, loneliness, helplessness, or other negative feelings. Clients may recall unpleasant memories. Also, clients in therapy may have problems with people important to them. Family secrets may be told. Therapy may disrupt a marital relationship and sometimes may even lead to a divorce. Sometimes, too, a client's problems may temporarily worsen after the beginning of treatment. Most of these risks are to be expected when people are making important changes in their lives. Finally, even with our best efforts, there is a risk that therapy may not work out well for you.

While you consider these risks, you should know also that the benefits of therapy have been shown in hundreds of well-designed research studies. People who are depressed may find their mood lifting. Others may no longer feel afraid, angry, or anxious. In therapy, people have a chance to talk things out fully until their feelings are relieved or the problems are solved. Clients' relationships and coping skills may improve greatly. They may get more satisfaction out of social and family relationships. Their personal goals and values may become clearer. They may grow in many directions—as persons, in their close relationships, in their work or schooling, and in the ability to enjoy their lives. I do not take on clients I do not think I can help. Therefore, I will enter our relationship with optimism about our progress.

### **Consultations**

If you could benefit from a treatment I cannot provide, I will help you to get it. You have a right to ask me about such other treatments, their risks, and their benefits. Based on what I learn about your problems, I may recommend a medical exam or use of medication. If I do this, I will fully discuss my reasons with you, so that you can decide what is best. If you are treated by another professional, I will coordinate my services with them and with your own medical doctor.

If for some reason treatment is not going well, I might suggest you see another therapist or another professional for an evaluation. As a responsible person and ethical therapist, I cannot continue to treat you if my treatment is not working for you. If you wish for another professional's opinion at any time, or wish to talk with another therapist, I will help you find a qualified person and will provide him or her with the information needed.

### **What to Expect from Our Relationship**

As a professional, I will use my best knowledge and skills to help you. This includes following the standards of the American Psychological Association (APA). In your best interests, the APA puts limits on the relationship between a therapist and a client, and I will abide by these. Let me explain these limits, so you will not think they are personal responses to you.

First, I am licensed and trained to practice psychology—not law, medicine, finance, or any other profession. I am not able to give you good advice from these other professional viewpoints.

## Lindsey Kremmel, PhD

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Second, state laws and the rules of the APA require me to keep what you tell me confidential (that is, just between us). You can trust me not to tell anyone else what you tell me, except in certain limited situations. I explain what those are in the “About Confidentiality” section of this packet. Here I want to explain that I try not to reveal who my clients are. This is part of my effort to maintain your privacy. If we meet on the street or socially, I may not say hello or talk to you very much. My behavior will not be a personal reaction to you, but a way to maintain the confidentiality of our relationship.

Third, in your best interest, and following the APA’s standards, I can only be your therapist. I cannot have any other role in your life. I cannot, now or ever, be a close friend to or socialize with any of my clients. I cannot be a therapist to someone who is already a friend. I can never have a sexual or romantic relationship with any client during, or after, the course of therapy. I cannot have a business relationship with any of my clients, other than the therapy relationship.

If you ever become involved in a divorce or custody dispute, I want you to understand and agree that I will not provide evaluations or expert testimony in court. You should hire a different mental health professional for any evaluations or testimony you require. This position is based on two reasons: (1) My statements will be seen as biased in your favor because we have a therapy relationship; and (2) the testimony might affect our therapy relationship, and I must put this relationship first.

Even though you might invite me, I will not attend your family gatherings, such as parties or weddings. As your therapist, I will not celebrate holidays or give you gifts; I may not notice or recall your birthday; and may not receive any of your gifts eagerly.

### **About Confidentiality**

I will treat with great care all the information you share with me. It is your legal right that our sessions and my records about you be kept private. That is why I ask you to sign a “release-of-information” form before I can talk about you or send my records about you to anyone else. In general, I will tell no one what you tell me. I will not even reveal that you are receiving treatment from me. In all but a few rare situations, your confidentiality is protected by federal and state laws and by the rules of my profession. Here are the most common cases in which confidentiality is not protected:

1. If you were sent to me by a court or an employer for evaluation or treatment, the court or employer expects a report from me. If this is your situation, please talk with me before you tell me anything you do not want the court or your employer to know. You have a right to tell me only what you are comfortable sharing.
2. Are you suing someone or being sued? Are you being charged with a crime? If so, and you tell the court that you are seeing me, I may then be ordered to show the court my records. If you file a lawsuit or commit a crime against me, you waive your right to confidentiality. Please consult your lawyer about these issues.
3. If you make a serious threat to harm yourself or another person, the law requires me to try to protect you or that other person. This usually means telling others about the threat. I cannot promise never to tell others about threats you make.

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4. If I believe a child, elder (person over age 65) or dependent adult (i.e. person unable to protect themselves) has been or will be abused or neglected, I am legally required to report this to the authorities.

There are two situations in which I might talk about part of your case with another therapist. I ask now for your understanding and agreement to let me do so in these two situations.

First, when I am away from the office for an extended amount of time, I may have a trusted fellow therapist “cover” for me. This therapist will be available to you in emergencies. Therefore, he or she needs to know about you. Of course, this therapist is bound by the same laws and rules as I am to protect your confidentiality.

Second, I sometimes consult other therapists or other professionals about my clients. This helps me in giving high-quality treatment. These persons are also required to keep your information private. Your full name will never be given to them, some information will be changed or omitted, and they will be told only as much as they need to know to understand your situation.

It may be beneficial for me to confer with your primary care physician with regard to your psychological treatment or to discuss any medical problems for which you are receiving treatment. In addition, Medicare requires that I notify your physician by telephone or in writing, concerning services that are being provided by me unless you request that notification not be made.

For the purpose of these consultations, I may want to make audio or video recordings of our sessions. I will review the recordings with my consultant to assist with your treatment. I will ask your permission to make any recording. I promise to destroy each recording as soon as I no longer need it, or, at the latest, when I destroy your case records. You can refuse to allow this recording, or can insist that the recording be edited.

Except for situations like those I have described above, my office staff and I will always maintain your privacy. I also ask you not to disclose the name or identity of any other client being seen in this office. My office staff makes every effort to keep the names and records of clients private. My staff and I will try never to use your name on the telephone, if clients in the office can overhear it. All staff members who see your records have been trained in how to keep records confidential.

If your records need to be seen by another professional, or anyone else, I will discuss it with you. If you agree to share these records, you will need to sign an authorization form. This form states exactly what information is to be shared, with whom, and why, and it also sets time limits. You may read this form at any time. If you have questions, please ask me.

It is my office policy to destroy clients’ records 15 years after the end of our therapy. Until then, I will keep your case records in a safe place.

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If I must discontinue our relationship because of illness, disability, or other presently unforeseen circumstances, I ask you to agree to my transferring your records to another therapist who will assure their confidentiality, preservation, and appropriate access.

As part of cost control efforts, an insurance company will sometimes ask for more information on symptoms, diagnoses, and my treatment methods. It will become part of your permanent medical record. I will let you know if this should occur and what the company has asked for. Please understand that I have no control over how these records are handled at the insurance company. My policy is to provide only as much information as the insurance company will need to pay your benefits.

You can review your own records in my files at any time. You may add to them or correct them, and you can have copies of them. I ask you to understand and agree that you may not examine records created by anyone else and then sent to me.

In some very rare situations, I may temporarily remove parts of your records before you see them. This would happen if I believe that the information will be harmful to you, but I will discuss this with you.

You have the right to ask that your information not be shared with family members or others, and I can agree to that limitation. You can also tell me if you want me to send mail or phone you at a more private address or number than, say, your home or workplace. If this is of concern to you, please tell me so that we can make arrangements.

### **Confidentiality and Minors**

When I treat children under the age of 12, I must tell their parents or guardians whatever they ask me. As children grow more able to understand and choose, they assume legal rights. For those between the ages of 12 and 18, most of the details of things they tell me will be treated as confidential. It is important for the child to feel safe and free to talk with me openly. However, parents or guardians do have the right to general information and any information about immediate safety concerns I may have. They need to be able to make well-informed decisions. I may also have to tell parents or guardians some information about other family members that I am told, especially if these others' actions put them or others in any danger.

In cases where I treat several members of a family (parents and children or other relatives), the confidentiality situation can become very complicated. I may have different duties toward different family members. At the start of our treatment, we must all have a clear understanding of our purposes and my role. Then we can be clear about any limits on confidentiality that may exist.

### **Social Media/Internet Policy** Adapted from Keely Kolmes, Psy.D. – Social Media Policy – 4/26/10

My Social Media/Internet Policy is in place to protect your confidentiality and our mutual privacy. Most online communication is not secure. Further, interacting online can blur the boundaries of our therapeutic relationship. You should know that any and all contact I receive from you (in any form) and any responses that I send to you become a part of your therapy record. I encourage you to bring any information, concerns, or items of interest into our sessions so that we may discuss them in person.

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**FRIENDING & INTERACTING:** I do not interact or follow or accept friend or contact requests from current or former clients on any type of social media (Facebook, LinkedIn, etc.).

**USE OF SEARCH ENGINES:** It is NOT a regular part of my practice to search for clients on Google or any other search engines. If I have a reason to suspect that you are in danger and you have not been in touch with me via our usual means (coming to appointments, phone, etc.) there *might* be an instance in which using a search engine (to find you, find someone close to you, or to check on your recent status updates) becomes necessary as part of ensuring your welfare. These are unusual situations and if I ever resort to such means, I will fully document it and discuss it with you when we next meet.

**BUSINESS REVIEW SITES:** You may find my psychology practice on sites such as Yelp, Healthgrades, Bing or other places which list businesses. Many of these sites automatically add listings regardless of whether the business has added itself to the site. If you should find my listing on any of these sites, please know that my listing is NOT a request for a testimonial, rating, or endorsement from you as my client. If you do choose to write something on a business review site, I hope you will keep in mind that you may be sharing personally revealing information in a public forum.

**LOCATION-BASED SERVICES:** If you use location-based services on your mobile phone, it is possible that others may surmise that you are a therapy client due to regular check-ins at my office. Please be aware of this risk if you are intentionally “checking in” from my office or if you have a passive LBS app enabled on your phone.

**EMAIL and TEXT MESSAGE:** Please know that if we use electronic communications methods, such as email, texting, online video, and possibly others, there are various phone/internet service provider technicians and administrators and even law enforcement personnel who may have access to the content of those communications. In some cases, these accesses are more likely than in others. Please consider if there would be any negative consequences to these communications being viewed by any potential 3rd party.

Of special consideration are work email addresses and phones. If you use your work email or phone to communicate with me, your employer may access our email or texting communications. There may be similar issues involved in school email or other email or phone accounts associated with organizations that you are affiliated with. Additionally, people (such as family members) with access to your computer, mobile phone, and/or other devices may also have access to your email and/or text messages. Please take a moment to contemplate the risks involved if any of these persons were to access the messages we exchange with each other. You may always opt-out of the use of electronic communications with me. We will discuss this at our intake appointment.

### **My Background**

- I have a bachelor’s degree (2001) in psychology from the University of Washington.
- I completed practicum training in:
  - a community mental health setting with chronically mentally ill adults (2006), and
  - a foster care organization working with foster and adopted children and adolescents (2007).

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- I completed an internship in clinical psychology (2008), accredited by the APA. I received specific training in the assessment and treatment of children ages 0-5.
- I have a doctoral degree (2008) in clinical psychology from Seattle Pacific University, whose program is accredited by the American Psychological Association (APA).
- I completed a postdoctoral residency in clinical psychology working in a busy outpatient medical clinic with both children/adolescents and adults (2009).
- I worked as a staff psychologist for Kaiser Permanente in the Department of Psychiatry and Behavioral Medicine from 2008-2020.
- I am licensed as a psychologist in California since 2009 (PSY22875).
- I am a member of the American Psychological Association.
- Before beginning my psychology career, I worked in early childhood education (ages 3-12). I was a classroom instructor, program director, and later, multi-site manager of a pre-school and elementary school-based program.

### **About Our Appointments**

The very first time I meet with you, we will need to give each other basic information. For this reason, it may take us more than one session to establish all of the basic information. We will usually meet for a 45-minute session (a “clinical hour”) once a week, then less often. We can schedule meetings for both your and my convenience. I will tell you in advance of my vacations or any other times we cannot meet. Please ask about my schedule in making your own plans.

An appointment is a commitment to our work. We agree to meet here and to be on time. If I am ever unable to start on time, I ask your understanding. I also assure you that you will receive the full time agreed to. If you are late, we will probably be unable to meet for the full time, because it is likely that I will have another appointment after yours.

A cancelled appointment delays our work. I will consider our meetings very important and ask you to do the same. Please try not to miss sessions if you can possibly help it. When you must cancel, please give me at least 24 hour’s notice (preferably a week’s notice). Your session time is reserved for you. I am rarely able to fill a cancelled session unless I know a week in advance. I understand that illnesses, vacations, or other situations arise that periodically make it difficult to attend your regular appointment day/time. The first 4 cancelled/missed appointments in a calendar year will be given at no charge. All missed or cancelled appointments (unless rescheduled for the same week) above and beyond these 4 sessions will be charged at the regular appointment rate regardless of the reason.

I request that you do not bring children with you if they are young and need babysitting or supervision, which I cannot provide.

You will be charged for any damage to, or theft of, property in this office by you or anyone for whom you are legally responsible. I cannot be responsible for any personal property or valuables you bring into this office.

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### Telehealth appointments:

Telephone or Video/Virtual (web-based) appointments may be suitable or even needed at times in our therapy. Telehealth services do require some special considerations, which I will address here.

- Potential Risks: technology glitches, poor or lost internet connection during session, insurance reimbursement problems, breach of privacy, discomfort with this type of interaction, difficulty reading non-verbal communication, and feeling less relationally connected.
- The web platform that I use ([doxy.me](https://doxy.me)) is a secure and HIPAA-compliant service designed for health care providers and I will always be in a physical space that is private.
- I ask that you agree to be in a quiet and private space for these sessions, free of distractions, with a device that is fully charged and has good and secure (not public wi-fi) internet access. Please turn off any listening devices such as Siri or Alexa, close the door or window and consider wearing earphones to limit what others might overhear.
- You need a webcam or smartphone for these sessions.
- In the event that our internet connection is lost or unreliable, we may switch part-way through the session to an audio-only phone call. Please have a phone available and ready for this circumstance.
- I will never record our sessions without permission from you. I asked that you also not record our sessions.
- It is tempting to feel more casual during these sessions, however, it is important that we maintain the same boundaries and frame of our work together. Please treat these sessions with the same respect and seriousness as you would if we were meeting in person (i.e. be on time, dressed appropriately, not eating food or consuming alcohol, etc).
- If you intend to submit for reimbursement from your insurance, please check first that they will reimburse for telehealth sessions.
- I am licensed to practice psychology in California. This means that I must only meet with clients (in-person or virtually) who are also physically in California at the time of our sessions.
- If you will be at a location other than the address I have on file for you, please provide that at the beginning of our session. In the event of an emergency, I need to know where you are in case I need to send someone for a welfare check.

### Fees, Payments, and Billing

Payment for services is an important part of any professional relationship. This is even more the case in therapy; one treatment goal is to make relationships and the duties and obligations they involve clear. You are responsible for seeing that my services are paid for. I currently accept cash, check or Venmo. I can provide a receipt if requested. A \$25.00 fee will be added to your balance for any check returned by the bank.

I realize that my fees involve a substantial amount of money, although they are well in line with similar professionals' charges. For you to get the best value for your money, we must work hard and well.

I will assume that our agreed-upon fee-paying relationship will continue as long as I provide services to you. I will assume this until you tell me in person, by telephone, email, or by certified mail that you wish to end it. You have a responsibility to pay for any services you receive before you end the relationship.

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Because I expect all payment at the time of our meetings, I usually do not send bills. However, if we have agreed that I will bill you, I ask that the bill be paid within 5 days of when you get it. Any payment not received within 30 days of service will incur a 10% late fee. Fees that continue unpaid will be turned over to small-claims court or a collection service. Please be aware that I reserve the right to use any and all contact information I have for you in order to attempt to get unpaid bills resolved.

If there is any problem with my charges, my billing, your insurance, or any other money-related point, please bring it to my attention. I will do the same with you. Such problems can interfere greatly with our work. They must be worked out openly and quickly.

**MOBILE/ELECTRONIC PAYMENT SERVICES (Venmo, Paypal, etc):** If you wish, you may pay fees electronically. I currently accept the use of Venmo. I have a duty to uphold your confidentiality, and the use of any electronic payment services potentially poses risks. Electronic payment services may automatically send you receipts or other communication by email, text message, app notification, etc. These communications may include my name and the services rendered. The use of the service may also have a “social media” aspect of it and the default settings may be “public”. Because of these and other possible breaches to confidentiality, it is important to understand the risks and ways to protect yourself. I will always place all of my settings on the highest level of “privacy” available. I strongly encourage you to make all transactions completely private on your end as well. I also encourage you to consider who might potentially see any email, text, app notifications or credit/bank account charges. For example, is your email address or phone number connected with an employer or shared with a family member? Would there be any negative consequences if one of those people saw the charges? Please consider these risks prior to using any electronic payment service.

My current regular fees are as follows. You will be given advance notice if my fees should change.

### Regular therapy services:

Sessions are 45 minutes long. The fee range is \$160-\$200. I do offer a limited amount of sliding-scale appointment slots for clients unable to pay the full amount. If this applies to you, please speak with me. Please pay at the time of each session. I have found that this arrangement helps us stay focused on our goals, and so it works best. It also allows me to keep my fees as low as possible, because it cuts down on my bookkeeping costs.

### Telehealth appointments:

I charge the regular session fee (\$160-\$200) for the typical 45 minute telephone or video/virtual visits. If I need to have long telephone conferences with other professionals as part of your treatment, you will be billed for these at the same rate as for regular therapy services, prorated for the length of the call. Of course, there is no charge for calls about appointments or similar business.

### Extended sessions:

Occasionally it may be better to go on with a session, rather than stop or postpone work on a particular issue. When this extension is more than 10 minutes, I will tell you, because sessions that are extended beyond 10

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minutes will be charged on a prorated basis. Extended sessions are only offered if I do not have another appointment scheduled after yours.

### Reports:

Report writing of any kind will be charged at our regular therapy fee, prorated over the time needed.

### Health Insurance Coverage

Because I am a licensed psychologist, many health insurance plans will help you pay for therapy and other services I offer. Because health insurance is written by many different companies, I cannot tell you what your plan covers. Please research your plan's coverage for "Outpatient Psychotherapy".

**I am not a member of any health insurance plans or panels.** Health insurance is a contract between you (or your employer) and your insurer; I am not part of that contract. However, many health insurance companies will reimburse clients for seeing an "out of network provider". I will supply you with an invoice for my services with the standard diagnostic and procedure codes for billing purposes, the times we met, my charges, and your payments. You can use this to apply for reimbursement.

If your health insurance will reimburse you part of my fee, as an "out of network provider", please keep two things in mind:

1. I had no role in deciding what your insurance covers. Your employer decided which, if any, services will be covered and how much you have to pay. You are responsible for checking your insurance coverage, deductibles, payment rates, copayments, and so forth. Your insurance contract is between you and your company; it is not between me and the insurance company.
2. You—not your insurance company or any other person or company—are responsible for paying the fees we agree upon.

I will provide information about you to your insurance company only with your informed and written consent.

### If You Need to Contact Me

**Please be aware that I do not offer emergency or crisis services. If you are experiencing a psychiatric emergency, dial 911 or go to the nearest Emergency Room. You may also call Crisis Support Services of Alameda County at 1-800-309-2131.**

### Office Location

91 West Neal Street  
Pleasanton, CA 94566

My office is conveniently located in downtown Pleasanton, California. I am in the same building unit as Divine Skin and Body Care and Tutu School. My office is half a block East from Main Street, and West of Meadowlark Dairy, across the street from Haps Original Steak and Seafood restaurant. My office is on the ground floor and off street parking is available in the back of the building.

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### Office Phone

My confidential voicemail is (510) 982-6477. Please leave your name, phone number, best time to call, and whether or not I may leave you a voice mail. I make every effort to return calls as soon as possible. I cannot promise that I will be available at all times; I do not take phone calls when I am with a client.

### Other Points

As a professional therapist, I naturally want to know more about how therapy helps people. To understand therapy better, I must collect information about clients before, during, and after therapy. Therefore, I may ask you to fill out some questionnaires about different parts of your life-relationships, changes, concerns, attitudes, and other areas. I ask your permission to take what you write on these questionnaires and what I have in my records and use it in research or teaching that I may do in the future. If I ever use the information from your questionnaire, it will always be included with information from many others. Also, your identity will be made completely anonymous. Your name will never be mentioned, and all personal information will be disguised and changed. All the data used will be destroyed after the research, teaching, or publishing project is complete.

If, as part of our therapy, you create and provide to me records, notes, artworks, or any other documents or materials, I will return the originals to you at your written request but will retain copies.

### Statement of Principles and Complaint Procedures

It is my intention to fully abide by all the rules of the American Psychological Association (APA) and by those of my state license.

Problems can arise in our relationship, just as in any other relationship. If you are not satisfied with any area of our work, please raise your concerns with me at once. Our work together will be slower and harder if your concerns with me are not worked out. I will make every effort to hear any complaints you have and to seek solutions to them. If you feel that I (or any other therapist) have treated you unfairly or have even broken a professional rule, please tell me. You can also contact the state or local psychological association and speak to the chairperson of the ethics committee. He or she can help clarify your concerns or tell you how to file a complaint. You may also contact the state board of psychology, the organization that licenses those of us in the independent practice of psychology.

In my practice as a psychologist, I do not discriminate against clients because of any of these factors: age, sex, gender, marital/family status, race, color, religious beliefs, ethnic origin, place of residence, veteran status, physical disability, health status, sexual orientation, or criminal record unrelated to present dangerousness. This is a personal commitment, as well as being required by federal, state, and local laws and regulations. I will always take steps to advance and support the values of equal opportunity, human dignity, and racial/ethnic/cultural diversity. If you believe you have been discriminated against, please bring this matter to my attention immediately.

I truly appreciate the chance you have given me to be of professional service to you, and look forward to a successful relationship with you. If you are satisfied with my services as we proceed, I (like any professional) would appreciate your referring other people to me who might also be able to make use of my services.