University of Montevallo Counseling Services
Station 6245 • Montevallo, Al 35115 • 205.665.6245

INFORMED CONSENT FOR COUNSELING SERVICES

CLIENT NAME_____**STUDENT ID #**_____

Counseling Services offers free and confidential clinical services to all currently enrolled, degree-seeking UM students, faculty, and staff. This document is intended to provide you with general information related to Counseling Services. If you have any questions and/or would like a copy of this document please ask your counselor.

Confidentiality
Federal and state laws, along with professional and ethical standards, prohibit the disclosure of any information you provide us unless we have your prior written consent. Even so, there are a few exceptions to the laws and standards of confidentiality wherein your counselor is legally obligated to inform proper authorities as well as others in some situations. The limitations to confidentiality are as follows:

- If Counseling Services learns or suspects that a minor child, dependent adult, or an elderly person is being abused. This includes suspected physical or sexual abuse, neglect, or chemical endangerment of a born or unborn child.
- If there is an indication that there may be an imminent danger to yourself or others.
- If Counseling Services is court ordered to disclose information about you.

In the event you become potentially dangerous to yourself or someone else, please indicate an emergency contact:

Name_____ Relationship_____ Phone_____

Emergencies
Counseling Services staff is available Monday – Friday from 8:00am – 5:00pm in the Lower Level of Main Hall. Should an afterhours emergency arise you should call the Birmingham Crisis Center at 205.323.7777. If this is a life threatening emergency you should immediately go to the nearest emergency room or call 911.

Risks and Benefits of Counseling
Counseling can be a beneficial experience; even so, some risks exist. Some risks could include remembering unpleasant events, feeling strong emotions, and experiencing an impact on your relationships. Benefits may include an improved ability to relate with others; a clearer understanding of self, values, goals, increased academic productivity; and an ability to deal with everyday stresses.

Counseling Staff
The Counseling Services clinical staff consists of licensed counselors and advanced graduate interns. All clinical staff is supervised by the Director of Counseling Services. Your counselor will answer any questions you may have about his or her education or credentials.

Consultation and Supervision
In order to provide you with the best services possible, your counselor may choose to consult with other Counseling Services staff members or other professionals. In addition, graduate level interns providing counseling services are supervised by a licensed counselor or a team that includes a licensed counselor. In an attempt to provide the best possible client service, that supervision may include live observation. Colleagues who provide consultation and/or supervision are subject to the same confidentiality restraints as your counselor.

Eligibility and Appropriateness for Services
All currently enrolled, degree-seeking UM students, faculty, and staff are eligible to receive services. The Counseling Services staff will decide on appropriateness and delivery of services, which is based upon the conditions and needs presented. No student suspected to be currently under the influence of alcohol or drugs will be seen.

Referrals and Termination

You have the right to terminate counseling at any time during the process. Should services outside the scope of Counseling Services be needed, a referral to a more appropriate external resource will be given to you. Internal referrals will be at the discretion of the counseling staff with consideration given to therapeutic appropriateness.

Audio and Videotaping

Counseling sessions may be audio or videotaped for the purposes of training and/or clinical supervision. These tapes are kept in a locked cabinet and are destroyed after use. Any concerns about taping can be discussed with your counselor or the director of Counseling Services. Taping **WILL NEVER** occur without your consent.

Email Communications

Counseling Services cannot ensure your email communications are confidential. For that reason Counseling Services recommends that you do not share personal or clinical information through email. In addition, email may not be checked daily, on weekends, or during University holidays. Therefore Counseling Services cannot guarantee that your email is received or addressed in a timely manner. If you have needs that require immediate attention we recommend that you contact Counseling Services during normal business hours (Mon-Fri 8:00am to 5:00pm) at 205.665.6245 or the Crisis Center at 205.323.7777 outside of normal business hours. If you have a life threatening emergency please call 911.

Assessment

Counseling Services is interested in your feedback. Once per semester you may be asked to complete a services evaluation. These evaluations are anonymous and confidential and your eligibility to receive services is not dependent on you completing an evaluation.

Missing Appointments

If you are unable to keep your counseling appointment please contact Counseling Services within 24 hours of your appointment or as soon as possible. If you do not show up for an appointment and do not call to reschedule future appointments may be removed from your counselor's schedule.

Being Late for Appointments

Sessions are generally 45 to 50 minutes long. If you arrive more than 15 minutes late for your appointment the counselor may choose to reschedule your appointment.

Counseling Records

Counseling records and other written information regarding services and contact you have had with Counseling Services is not part of your college record and is only accessible by Counseling Services Staff. Counseling files are maintained for 10 years after your last visit and then destroyed. You may in writing make a request to review your records to the Director of Counseling Services. You may also request that your records be released to a 3rd party by signing an authorization to release information.

I UNDERSTAND AND HAVE HAD THE OPPORTUNITY TO DISCUSS ANY QUESTIONS I HAVE ABOUT THIS INFORMATION:

Client's Signature_____ **Date**_____

I HAVE DISCUSSED THIS INFORMATION WITH THE CLIENT:

Staff Signature_____ **Date**_____