Request Appointment

* Indicates required question

1. Email *

2. Name *

3. Phone

4. Type of Therapy Requested *

Check all that apply.

- Individual Therapy
- Couples Therapy
- Group Therapy (Please list the group therapy interested in description)

5. Session Format or Location

Check all that apply.

- Virtual Therapy
- Phone Therapy
- In-person Therapy (limited availability)

6. Weekday Appointment Availability

Check all that apply.

	Morning	Afternoon	Evening	
Monday				
Tuesday				
Wednesday				
Thursday				

7. Friday & Weekend Appointment Availability

Check all that apply.

	Morning	Afternoon	Evening
Friday			
Saturday			
Sunday			

8. Do you have private insurance coverage?

Check all that apply.



9. If yes, which professional providers are covered under your insurance? Please note we do NOT have psychologists at our clinic! Check your insurance for the the registration title e.g. psychotherapist, not descriptive terms like psychotherapy.

Check all that apply.

Psychotherapist

Social Workers - MSW only

Social Worker - RSW or MSW

10. Would you prefer a therapist with (check all that apply):

Check all that apply.

- Under 10 years experience (\$160 and \$200 session fee)
- Over 10 years experience (\$180 and \$225 session fee)
- Student Therapist 1st year practicum (\$65 and \$80 session fee)
- Student Therapist 2nd year practicum (\$100 and \$125 session fee)
- No Preference Best Fit/Availability
- 11. What are some of the needs, goals and interests you would like to see focused on in therapy? Do you have any preferences for your therapist?

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