

Hopepunk Therapy, LLC

CLIENT CONSENT FOR CLINICAL SUPERVISION

The counseling offered is being delivered by a therapist under clinical supervision. In order to meet professional standards for the education and development of counselors pursuing clinical licensure, we need to have our clients agree in writing to the following:

Permission to allow the supervisor(s) of your counselor full access to your client file for the purpose of guiding your counseling and your counselor's training. Your counselor is being supervised by:

Annas Boyer, LSCSW, LCAC



Supervisor's contact information has been redacted from this very public document. Clients will have access to this information.

We believe these practices contribute to the high quality of professional services to you, our valued client. Thank you for your cooperation.

Signature

Date