HOPE HAVEN PSYCHOLOGICAL RESOURCE

5610 Crawfordsville Road, Suite 200 Indianapolis, Indiana 46224-3739 Phone: (317) 241-HOPE 4673 Fax: (317) 241-0201 www.hopehavenpsych.org

Acknowledgement Understanding HSPP Clinical Supervision

Hope Haven has a genuine interest, passion, and aim to provide you and/or your family with the best quality care possible. In an attempt to provide such a service, all clinical providers receive onsite, direct, and frequent supervision from Dr. Benetta E. Johnson, Ph.D., HSPP, Owner and Licensed Counseling Psychologist of Hope Haven.

The purpose of this supervision is to:

- -Review best practices and treatment planning specific to you or your family member's behavioral healthcare needs
- -Ensure that the services you receive are not harmful to your or your loved one
- -Where necessary, meet Insurance and/or Third-Party Payor Requirements and Mandates

By signing this form you acknowledge your awareness and understanding of the above noted review of your clinical care.

I. <u>Signatures</u>		
Client Name (First MI Last) PLEASE PRINT	Date of Birth Age	
Client Signature Electronic Signature	Date Parent/Guardian/Representative Sign. Electronic Signature	Date
Witness/Psychological Prof. Signature D Electronic Signature	Date Legal Authority of Representative	
Print: Psychological Prof Name and Credentials	als	