

Randall A. Cripe, MA, LLPC

Clear Life Services, LLC • 11771 Newburgh Rd. • Livonia, MI 48150
www.clearlifeservices.com • (248) 763-6490 • clearlifeservices@gmail.com

PROFESSIONAL DISCLOSURE STATEMENT & INFORMED CONSENT

1. Qualifications & Credentials

- State of Michigan Limited Licensed Professional Counselor (LLPC)
- Master of Arts in Counseling from Spring Arbor University
- Bachelor of Arts in Psychology from William Tyndale College
- Certified Coach through Coach Training Alliance
- Internationally Certified Job and Career Transition Coach (JCTC)
- Certified Global Career Development Facilitator (GCDF)
- Extensive personal experience and participation in individual and group counseling

2. Counseling Goals & Roles

- I strive to help create a safe and nonjudgmental place where you can freely express your authenticity and creativity
- I expect you to uphold responsibility for your entire self including your strengths, weaknesses, thoughts, feelings, emotions, reactions and behaviors
- I pledge to travel with you on your journey towards healing and wholeness and will help you learn how to find strength in yourself and God

3. Services Provided & Areas of Interest

- Individual, couple, marital, family & group counseling for children, adolescents and adults
- Relational/marital enhancement, life/career transitions, self-esteem improvement, gender-identity confusion/contempt, unwanted same-sex attractions, trauma and abuse

4. Confidentiality & Supervision

- What you say will be kept strictly confidential between you and I, except for the following:
 - 1) You imply/express danger to yourself or someone else
 - 2) You are an alleged participant in child or elder abuse
 - 3) You provide written permission for me to release information
 - 4) I am ordered by court to disclose information
- Pertinent therapeutic concerns regarding your situation will be discussed with my supervisor and peers in order to help me provide you with the best treatment options; however, any disclosed information will be strictly limited to therapeutically relevant issues
- During my 3,000 hours of post-degree counseling, I will be working under the supervision of Sheryl Schumacher, MA, LPC of Hope Counseling Service (Warren, MI)

5. Benefits & Consequences

- Counseling provides many people with the opportunity to freely share their thoughts, feelings, emotions and experiences in a safe and non-judgmental place
- Many people find that counseling helps them find new sources of inner strength and helps them create new possibilities by pursuing deeper levels of growth and healing leading to greater peace, balance, freedom and harmony
- In order to reach these new horizons, however, most persons must be willing to persevere through some acutely painful and difficult emotions, memories and/or events in order to confront, resolve and heal their past hurts, wounds, scars, shadows and traumas

6. Scheduling & Frequency of Sessions

- Treatment typically lasts between 1-12 months depending upon the presenting problem, frequency of treatment sessions, therapeutic goals, available support systems, individual level of motivation, and extent to which the presenting problem has impaired life
- Counseling appointments are available during evenings and weekends and can be scheduled by calling (248) 763-6490 or emailing clearlifeservices@gmail.com
- Counseling sessions are typically 50-60 minutes long and can be scheduled on a weekly, bi-weekly or monthly basis
- Messages can be left 24/7 on our confidential number (248) 763-6490 and will be returned within 24 hours; calls exceeding 10 minutes will be billed at the normal session rate

7. Cost & Methods of Payment

- Services are provided at a private-pay rate of \$75 per session (50-60 minutes)
- We do not bill insurance companies, therefore payment is requested at the time of service
- Payment available via cash or check payable to Clear Life Services; \$25 return check fee
- Missed appointments and/or appointments cancelled with less than 24 hours notice are subject to a \$25 cancellation fee (excluding unforeseen emergency/illness)
- In order to maintain appointment times, counseling sessions will end at their scheduled time when clients arrive late; however, session times will be extended if the counselor runs late

8. Termination, Complaints & Verifications

- Please discuss with me any dissatisfaction you have regarding the services you are receiving; however, you have the right to discontinue services at any time and for any reason
- If for any reason it becomes necessary for me to discontinue providing services, I will make every attempt to provide you with appropriate referrals to other qualified therapists
- You have the right to file a formal complaint regarding your counseling services with the Michigan Department of Community Health, Health Regulatory Division, P.O. Box 30670, Lansing, MI 48909, phone (517) 373-9196

I, _____ (client’s printed name), acknowledge that I have carefully read this Professional Disclosure Statement & Informed Consent, have received a copy, and freely agree to the aforementioned terms.

Client Signature

Date

Randall A. Cripe, MA, LLPC

Date

Sheryl Schumacher, MA, LPC (License #6401007098) agrees to supervise Randall A. Cripe, MA, LLPC (License #6401010384) for the required post-degree counseling experience.