

PERMISSION TO SCREEN, EVALUATE AND/OR PROVIDE THERAPY

Client/Child Name _____ DOB _____

Parent Name _____

Please complete the form below to authorize a comprehensive speech and language evaluation, and/or treatment (as needed) for your child. Please PRINT your name and the client's/child's name below.

EVALUATION:

I, _____ (parent/guardian), authorize My Speechee to evaluate my child _____ (client/child's name).

THERAPY:

I _____ (parent/guardian) authorize My Speechee to provide the necessary speech and/or language treatment/therapy/services to _____ (client/child's name).

If your child has been recommended for a speech-language evaluation following a screening, your speech-language pathologist will speak with you about the results of the screening and fees associated with an evaluation and therapy. You will be asked whether you would like your child to receive a comprehensive evaluation and if an evaluation is agreed upon, a state-licensed and certified speech-language pathologist will administer the evaluation (including standardized evaluation tests, language samples, caregiver interviews, etc.). Results of the evaluation will determine a treatment/therapy course that will include the recommendations of the speech-language pathologist and input from the parent. Your therapist will provide subsequent treatment, if needed, to the aforementioned child.

VIDEO/PHOTO PERMISSION:

YES { } I authorize My Speechee to record or photograph my child solely for the EDUCATIONAL AND THERAPEUTIC PURPOSES of enhancing speech and language services.

{ } I prefer videos/photos to be shared with me via email _____

{ } I prefer videos/photos to be shared with me via text message _____

Please list any other individuals with whom you would like My Speechee to share photos/videos, along with their contact information (email/cell number).

Name	Contact Info
_____	_____
_____	_____
_____	_____

NO { } I do not authorize My Speechee to record or photograph my child.

Parent/Guardian Signature

Date

Parent/Guardian Printed Name