

STRONGGirls
Authorization for Release of Information

Client Name _____ Date _____

Date of Birth _____

I give authorization and permission to:

Creative Wellness/STRONGGirls Staff:

To: release to _____ obtain from _____ exchange with X _____

Principal / Counselor/ Teacher @ _____
Name (List name of school in which the student currently attends)

Street Address or PO Box Address _____

City _____ State Alabama Zip Code _____ Phone Number _____

Information regarding my medical/psychological treatment/drug history & treatment/behavior

Purpose of Release: To obtain/exchange/release information minimally necessary for continuum of care

Information to be released /obtained:

- X Intake and psychosocial _____ Psychiatric consult & evaluation materials
- X Treatment summary including diagnosis X Psychological testing & evaluation
- _____ Discharge Summary X Case Summary
- X Other: Any records or information deemed necessary by the staff for continuum of care, and school visits to meet with staff personnel regarding client's academics and behavior while at school and for individual counseling sessions.

Restrictions: None _____

It is understood that the duration of this consent will not be longer than would be necessary and reasonable to carry out the purpose for which it is given, and that I may revoke this consent in writing at any time. In the event that I revoke my consent, I understand that it shall not apply to any actions taken prior to the effective date of the revocation.

Date this expires: January 31, 2015.

I, the undersigned, her acknowledge that I have read this authorization prior to its execution and fully understand the nature of this release.

Client signature: _____ Date: _____

Parent/Guardian: _____ Date: _____
(Parent or guardian must sign if the client is under 18 yrs. old)

Witness Signature: _____ Date: _____

Notice to Recipient of Release: This information has been disclosed to you from records protected by Federal confidentiality rules (42 CFR Part 2). The Federal rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Part 2.