



Counseling Services
405 Fayette Pike, Old Main Rm. 322
Montgomery, WV 25136

Welcome to WVU Tech Counseling Services. This informed consent document is intended to provide you with general information about our services. This is a legal document; please read it carefully before signing. If you have any questions about this document and/or would like a copy please ask your counselor.

Eligibility

I understand that eligibility for services is typically contingent upon my status as an enrolled or continuing WVU Tech students. If I am not enrolled as a student, staff will assist me with accessing counseling in the community.

Provision of Services

I understand that WVU Tech offers a variety of clinical services to students including: consultations, short term individual counseling (up to 12 sessions per year), psychiatric referrals, crisis intervention, group counseling, case management, and referral. During my initial assessment, a counselor and I will work together to determine how best to meet my needs. I further understand that appropriate referrals will be provided to me if it is determined that I would be best served by a community resource.

Nature of Counseling

I understand that there may be both risks and benefits associated with counseling. Risks may include experiencing uncomfortable feelings, such as sadness, guilt, anxiety, anger, frustration, loneliness, and helplessness, because the process often requires discussing the unpleasant aspects of life. However, counseling may improve my ability to relate to others as well as provide a better understanding of myself, my values, and an improved ability to deal with stressors. Although counseling can be beneficial, it may not be helpful for everyone.

Counseling Staff

WVU Tech Counseling Services is staffed with a WV licensed certified social worker.

Confidentiality

I understand that the WVU Tech counselor maintains confidentiality in accordance with the ethical guidelines and legal requirements of their profession. Effective counseling sometimes requires that staff members share confidential information with other counseling professionals. *The counselor may consult with a community Counseling Professional, or a Psychologist, Psychiatrist, or Counselor from WELL WVU – Carruth Center, or Potomac State College.*

I understand that no records or information about me will be released from WVU Tech Counseling Services without my consent, **except under the following circumstances:**

- When doing so is necessary to protect clients or someone else from imminent physical and/or life-threatening harm.
- When a client lacks the capacity or refuses to care for him/herself and such lack of self-care presents substantial threat to his or her well-being.
- When the abuse, neglect, or exploitation of a child, elder adult, or dependent adult is suspected.
- When a client pursues civil or criminal legal action against the Center or its staff, or when a client makes a complaint to a Professional Board about a clinician.
- When a client is involved in a legal proceeding and there is a court order for the release of records, or when a release is otherwise required by law.

Conflict of Interest

Students who may know therapist from outside the WVU Tech environment are discouraged from obtaining services due to a conflict of interest. At any such time there may be conflicts of interest that arise; your counselor will discuss this with you and create a plan for referral to outside services.

Records

Your records will be stored electronically and include the information you provided and information about any interactions (counseling, phone calls, consultation, emails, etc.) with WVU Tech Counseling Services staff. This information is only accessible within WVU Tech Counseling Services and is protected by multiple security measures. This information is separate from your academic records but may be de-identified and used for research or quality assurance purposes.

EMERGENCY

If you are experiencing a psychological emergency that is life threatening, call 911 or go to your nearest emergency room. In the event that you are experiencing a psychological emergency that is not life threatening, please contact the Counseling Center at (304)442-3209 24 hours a day, 7 days a week to speak with a crisis counselor.

Consent

I certify that I have read, understand, and agree to abide by the information outlined above regarding my eligibility and use of WVU Tech Counseling Services. I hereby give my consent to authorize WVU Tech Counseling Services to evaluate, treat, and/or refer me to others as needed. I have had the opportunity to discuss any questions regarding the above information.

PRINTED NAME: _____
(Please print legibly) (first) (middle) (last) Student ID #:

I have been provided with and read this Informed Consent Document

Signature: _____ *Witness:* _____ *Date:* _____

I have been given the HIPAA (Health Insurance Portability and Accountability ACT) document and the WVU TECH COUNSELING SERVICES Notice of Privacy Practices.

Signature: _____ *Witness:* _____ *Date:* _____