Maine Disclosure Statement

Pursuant to the Board of Counseling Professionals Licensure's Rules, a licensee shall personally give a copy of the disclosure statement to each client in hand at the commencement of the counseling relationship.

Licensee Information	
Name:	Maine License Number:
Address:	Maine License Type:
Phone Number:	Initial Maine License Issue Date:
Business Hours:	Current Maine License Expiration Date:

Graduate Degree(s):			
Institution Name:	Degree Type:	Major:	Date Conferred:

Is current license conditional? ☐ Yes ☐ No

A conditional licensee has met the initial requirements for this license and is working under professional supervision to obtain the experience necessary for full licensure. The counselor may discuss your case with the supervisor. The counselor may ask you for permission to allow the supervisor to sit in on a session. You are free to refuse if this would make you uncomfortable.

Counseling Service Information

Exceptions to Confidentiality:

1. Threat of serious harm to self or others.
2. Reasonable suspicion of abuse, neglect or exploitation of a child or an incapacitated or dependent adult.
3. Court order.
4. Voluntary release signed by client or guardian.
5. During supervisory consultations.

Areas of Competence:

Course of Treatment *(including intake, assessment, goal setting and treatment plan)*:

Fee Schedule:

Method of Billing:

Payment Terms:

Fee Modifications:

Insurance:

Accountability:

The practice of counseling is regulated by the Board of Counseling Professionals Licensure. The Board is authorized by law to discipline counselors who violate the Board's law or rules. To learn about the complaint process or to file a complaint against a counselor contact:

Complaint Coordinator
Office of Professional & Occupational Regulation
35 State House Station
Augusta, ME 04333
(207) 624-8660
www.maine.gov/professionallicensing