Email: khdcounseling@gmail.com

Phone: 703.851.1009

Professional Disclosure Statement for Professional Mentorship & Consultation

Description of Services

In my business, I offer professional mentorship and consultation services. These services are between the client and myself, Kathleen Driscoll (referred to as the consultant), and are co-constructed in terms of defined goals and needs from the client. We will work together on what the client wants for themselves and often times the work becomes organic and fluid. However, some common themes and topics that I see arise in mentorship & consultation settings are as follows:

- Job Search: Interviewing, Cover Letter & Resume/CV Development, Job Offers and Negotiation
- Imposter Syndrome
- Managing a Caseload
- Higher Education: Applying for PhD Programs and Life as a Doctoral Student
- Counselor Identity
- State Licensure & Counseling Examinations

- Professional Development: Trainings, Research Engagement, and Writing
- Adopting and Applying a Theoretical Orientation
- Managing Transference and Countertransference
- Supervisor/Supervisee Dynamics
- Work/Life Balance
- Private Practice Start Up & Maintenance
- Self-Care & Burnout

Services are not limited to these topics, and as the relationship unfolds, the work may ebb and flow with the needs and goals that arise. All sessions will be held via Zoom.

Individual Services

There are many ways this working relationship can look and we can certainly collaborate on what type of relationship would work best for your aims and goals. I offer a free 15 minute consultation meeting to discuss your needs and how we could work together. My clients and I discuss the needs, wants, and goals of our working relationship and we co-construct an individualized plan for moving through these goals. My clients and I arrange meetings on a regular basis and move from there.

Group Services

Consultation Groups: Folks who come to me looking for more consultation services will often be interested in participating in a consultation group. These group settings provide an environment where we can discuss clinical work, professional endeavors, personal processes of working as a counselor, case studies on clients that the group members are working with, etc. My intention for

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these groups, and the tone that I set in the formation of these groups, is that this is a community where members feel safe to land. I maintain responsibility for holding space for the group and providing an atmosphere of both challenge and support. Peer to peer learning is integral in these groups as well, which speaks to the collaborative energy these groups can create.

Special Topics Group Presentations: I present on specific topics to groups who have a special interest. These presentations are privately negotiated upon in terms of topic and fee.

Client Responsibilities & Fees

Every client is expected to keep their appointments. I reserve the right to not hold a session with a client who comes more than 15 minutes late, and/or if two or more appointments are missed (without notification via email or phone), services may no longer be offered. Please communicate with me about scheduling difficulties if they arise. I understand that life circumstances happen, please let me know your situation so I can best assist you in relation to scheduling. Clients will pay at the time services and payment will be accepted via Zelle (or another agreed upon arrangement if Zelle is not an option because of banking issues), cash, or check. If payment is not received on the date of services, I will reach out to you via email and develop a plan for payment to be completed. Future sessions will not be scheduled or held until payment is received.

Individual Mentorship & Consultation Services Fees:

- Currently Enrolled Graduate Students: \$100/hr
- Mental Health Professionals: \$150/hr

Group Mentorship & Consultation Services Fees:

- Consultation Groups: \$50/person/group session
- Group Presentations: Negotiated Privately

Intellectual Property

There may be instances in our work together where I may share personally made resources (i.e. powerpoints, templates, worksheets, etc). Any personally made resource that is shared with you is considered the intellectual property of the consultant. Nothing in this agreement will function to transfer any of either party's intellectual property rights to the other party and each party will retain exclusive ownership of its intellectual property developed before this agreement or developed outside of this agreement.

Privacy, Confidentiality, and the Professional Relationship

Any communication between the client and consultant becomes a part of a professional record which is accessible to the client upon request. The consultant agrees to refrain from disclosing to any third party any details regarding the client's business, including any information regarding any of the client's customers and business prospects. The consultant shall not disclose, transmit, or convey, wholly or partially, the information learned in the professional relationship to any third party without the written consent of the other party. In the event that the consultant is legally compelled or required by any governmental body, court, or competent authority to disclose any such confidential information, the

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consultant will promptly notify the client so that the latter may be able to seek a protective order or avail itself of other appropriate remedies and/or waive compliance with the provisions hereof.

Much like how I view the counseling relationship, I value the intimate and unique relationship I have with the clients I work with in consultation and mentorship settings. I hope to provide an open space for you to explore options, ground into your intuition, and ultimately move to an inner place of knowing. In my consultation and mentorship services, I model the same relational aspects of counseling in regard to confidentiality, unconditional positive regard, safety, and trust. Our relationship is critical to the impact and effectiveness of our work together.

Acceptance of Terms

We agree to these terms and will abide by these guidelines.

Please sign and date both copies of this form so we can each keep one for our records.

Client Print Name:		Date:	
Client Phone Number:	Client Email:		
Client Signature:		Date:	
Consultant Print Name:		Date:	
Consultant Signature:		Date:	