



Mid-Ohio Psychological Services, Inc.

Voice (614) 751-0042

2238 South Hamilton Road, Suite 200 – Columbus, OH 43232

www.mopsohio.com

Fax (614) 751-0047

STATEMENT OF SUPERVISORY RELATIONSHIP

I understand that Sally A. Intern, M.A. is under the direct clinical supervision of Sonya N. Slater, Psy.D., Psychologist, and that Ms. Shariati must review all clinical information with Dr. Slater. I further acknowledge that I have been given the *Office Policy and Procedures* handout describing the nature of the counseling process, costs for services, and limits of confidentiality. I understand that I may contact Dr. Slater at this agency if I have any questions or concerns regarding the services that I am receiving.

Print Client Name

Client/Guardian Signature

Date

Sally Intern, M.A.
Psychology Intern

Sonya N. Slater, Psy.D.
Psychologist