

**The Psychology Centre**

Clinical Psychology Training and Research Centre

Tel: (03) 369 3777 Fax: (03) 364 2410

E mail address: [psychclinic@canterbury.ac.nz](mailto:psychclinic@canterbury.ac.nz)Website: <https://www.canterbury.ac.nz/science/clinics/psychology-centre/>**REFERRAL FORM***He mana tō te tangata/We value people and their differences.**Kia aroha ki te tangata/We extend care and empower other.*

The UC Psychology Centre can offer psychological assessment and therapy for a range of difficulties for both adults and children. We welcome referrals from people in the community wishing to refer themselves (or their children) as well as from other professionals.

**Note:** As a training clinic we are not able to accept referrals for clients who pose an acute and serious risk to themselves or others, or whose primary needs would be better met through mental health services. We are also not able to undertake work related to court or legal matters. We do not provide crisis or emergency support. Please contact the Centre if you would like to confirm suitability.

DATE: \_\_\_\_\_

Fee Quoted: \$

**REFERRER DETAILS: (e.g. GP, health professional, parent)**

<b>Referrer's Name:</b>	<b>Relationship to Client:</b>
<b>Address:</b>	<b>Phone:</b>

**CLIENT DETAILS**

<b>Name:</b>		<b>D.O.B:</b>
<b>Ethnicity:</b>		<b>Age:</b>
<b>Address</b>		<b>Pronouns:</b>
<b>Phone</b>		<b>GP:</b>
<b>Home:</b>	<b>Work:</b>	
<b>Cell:</b>	<b>Email:</b>	

**FOR A CHILD/ADOLESCENT REFERRAL (IF UNDER AGE 18 YEARS)****Parent/Guardian 1:****Name:****Contact Number:****Parent/Guardian 2:****Name:****Contact Number:****Are there any legal/custody arrangements in place? Please detail.**

**REASON FOR REFERRAL:**

**Referral Type:**  
 Assessment  
 Therapy

Please provide some information about your key concerns to help us determine how we can best meet your needs:

**KNOWN RISKS (past and present including: suicidality, aggression, self-harm):**

**OTHER AGENCIES INVOLVED**

**IS THE CLIENT AWARE THAT:**

<b>This referral has been made?</b>	<b>YES</b> <input type="checkbox"/>	<b>NO</b> <input type="checkbox"/>
<b>The Centre is a training service which involves Clinical Psychology students in assessment and treatment of clients?</b>	<b>YES</b> <input type="checkbox"/>	<b>NO</b> <input type="checkbox"/>
<b>The Centre charges fees as detailed below?</b>	<b>YES</b> <input type="checkbox"/>	<b>NO</b> <input type="checkbox"/>

<b>FEEES</b>	
<b><u>Assessment</u></b>	
<b>Standard Assessment</b> (Including ADHD/ASD/Learning Assessment)	<b>\$850.00</b>
<b>Extended Assessment</b>	<b>\$1200.00</b>
<b><u>Therapy</u></b>	
<b>Therapy (Student Involvement)</b>	<b>\$185.00 Initial Assessment</b> <b>\$125.00 Continuing Therapy</b>
<b>Therapy (Student Involvement) Tertiary Student</b>	<b>\$115.00 Initial Assessment</b> <b>\$75.00 Continuing Therapy</b>