The UNC Department of Psychology Community Clinic is a community-based training facility for the Ph.D. program in clinical psychology. We are dedicated to providing the highest quality training for our graduate students as they learn evidence based psychological treatments. Fees from services provided are used by the Clinic to further this endeavor.

**CLIENT FEE AGREEMENT**

I understand my fee for services received from the UNC Department of Psychology Community Clinic is derived from a sliding fee scale based on my stated income. Based on information I have provided to the Clinic my rate for services provided is as follows:

- **Therapy Fee**: $____/session 100% of session rate at completion of session (NO coins) $____/intake (if applicable, such as anxiety, etc)

  Due to the potential for extenuating circumstances, student therapists are authorized to allow a one session balance due carryover for therapy sessions, however it is expected that payment will be brought up to date by the next session. If there is a balance due of more than two sessions, your account will be turned over to clinic staff for collection and treatment may be terminated.

- **Couples Session** (combined partner rate): _____

- **Assessment Total Fee**: _____  Type: ☐ EKA ☐ Gifted ☐ Full ☐ Corbitt ☐ Student Ath.

  EKA and Gifted: 100% due at FIRST session

  **Full**: 50% at first session, remaining 50% at second session

  **CORBITT/Student Athlete**: (a) UNC PID:__________ (b) ☐ I understand the UNC invoice contains only the session dates and type of service (the email approval from the UNC authorizing office is attached)

- **Legal**: If the Clinic is SUBPOENED to provide any client documentation or testimony, a rate of $250/hour may be charged

I have read and understand the above, and **I agree to the stated fee and payment policy**:

**Name\Signature**:  
Client: ___________________________  
Date:  __/__/____

**FOR MINORS**

Parent/Guardian: ___________________________  
Date:  __/__/____

Therapist: ___________________________  
Date:  __/__/____