**Group Agreement: Anxiety Workshop**

**NAU Counseling Services**

**Confidentiality agreement**: You have the right to confidentiality and privacy by the group leaders and other group members. Group leaders are ethically and legally bound not to discuss details of group outside of the Campus Health Services setting unless there is a clear danger to self or others. Group members do not have the same legal requirements, though they are expected to operate under the understanding that confidentiality is taken seriously and must be respected.

* **Group Agreement**:
  + I understand that what I say to my counselor is confidential with the exceptions of specific safety concerns. Other members of the group are not bound by the same requirements though the importance of confidentially within the group is made known.
  + I agree to commit to a minimum number of 3 sessions.
  + After 2 no shows, members will automatically give up their spot in group.
  + I agree to come to therapy each week, arrive on time, and stay for the entire group. If a situation arises where this will not be the case, I am to inform the group.
  + I agree that if I am going to miss a session I will call (928 523-2261) and cancel at least two hours in advance; otherwise, there will be a $10 no-show charge.
  + I agree to turn off my cell phone for the entirety of the group session.
  + I agree to remain in group until I feel that I have met my therapeutic goals. At that time, I am to inform the members of my intentions to no longer attend group.
  + I understand that if I do not inform the group or group therapists of my termination, I will continue to be charged a no-show fee ($10) for up to 2 weeks at which point I will be removed from the group roster.
  + I understand that the work of any unlicensed staff will be supervised by a licensed staff member.
  + Due to the structure of this workshop and when information is presented, if you expect to arrive later than 30mins after the start time, we ask that you not attend that session.

Group Leaders: Olivia Rios, Ph.D. and Amy M. Bissinger, Psy.D.

Time & Date of Group: Tuesdays, 3:00 – 4:30 pm

Counseling Services: 928 523-2261, M-F 8AM - 5PM

Name: Group:

What issues do you plan to work on in group?

How would you like to be different after group? How can group help you change?

Any questions about group?