

INTEGRITY COUNSELING & COACHING
1501 S. Belcher Road, Suite B-4
Largo, FL 33771
(727) 531-7988

**CONSENT FOR INTEGRITY COUNSELING & COACHING TO RELEASE
CONFIDENTIAL INFORMATION ABOUT DUI**

I, _____ DOB: _____

HEREBY AUTHORIZE: Integrity Counseling & Coaching, Inc., its therapists and its representatives.

TO RELEASE TO THE FOLLOWING SPECIFIED PERSON OR AGENCIES:

Suncoast Safety Council (727) 442-0233 fax (727) 447-1677

Probation Officer or court representative if applicable

Other:

THE FOLLOWING INFORMATION: Results of evaluation including recommendations and urinalysis drug screen (abstinence) results. Records substantiating treatment including compliance with treatment recommendations and abstinence status including subsequent drug tests, discharge information such as discharge summary and after treatment plan.

FOR THE PURPOSE OF: Compliance with DUI/ Probation. We MUST notify Suncoast Safety Council and your probation officer of positive drug tests.

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I UNDERSTAND THAT THIS CONSENT TO OBTAIN CONFIDENTIAL INFORMATION IS SUBJECT TO REVOCATION BY ME, EXCEPT TO THAT ACTION WHICH HAS BEEN TAKEN IN RELIANCE THEREON AND UNLESS OTHERWISE STATED, THIS CONSENT SHALL HAVE A DURATION NO LONGER THAN THAT NECESSARY TO EFFECTUATE THE PURPOSE FOR WHICH IT IS GIVEN. **One year from the date signed.**

CLIENT SIGNATURE: \_\_\_\_\_

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

GUARDIAN SIGNATURE: \_\_\_\_\_

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

WITNESSESED BY: \_\_\_\_\_

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

**CONFIDENTIALITY NOTICE**

“THIS INFORMATION HAS BEEN DISCLOSED TO YOU FROM RECORDS WHOSE CONFIDENTIALITY IS PROTECTED BY FEDERAL REGULATIONS (42 CFR PART 2) AND PROHIBITS YOU FROM MAKING ANY FURTHER DISCLOSURE OF IT WITHOUT SPECIFIC WRITTEN CONSENT OF THE PERSON TO WHOM IT PERTAINS, OR AS OTHERWISE PERMITTED BY SUCH REGULATIONS. A GENERAL AUTHORIZATION FOR THE RELEASE OF MEDICAL OR OTHER INFORMATION IS NOT SUFFICIENT FOR THIS PURPOSE.”

Reports will be sent either by US mail or electronically via FAX or E-mail. We will provide you with free copies of customary reports. If you want us to mail or fax these reports, there is a \$5.00 fee.

\_\_\_\_\_ By initialing here, I give permission to fax information to the above agencies.