Christine Tronge, LCSW (BBS #27832)
Seeking Wellness Counseling
1885 The Alameda, Suite 100-I
San Jose, CA 95126
Phone: (408) 287-1564 **www.MySeekingWellness.com**

(Please Bring This Signed Form with You to Your First Appointment)

Notice of Privacy Practices
Receipt and Acknowledgment of Notice

Patient/Client Name:_____
DOB: _____ SSN:_____ (Last 4 Digits)

I hereby acknowledge that I have received and have been given an opportunity to read a copy of Christine Tronge, LCSW's Privacy Practices. I understand that if I have any questions regarding the Notice or my privacy rights, I can contact the Privacy Officer at the name and address above.

_____
Signature of Patient/Client

_____
Signature or Parent, Guardian or
Personal Representative*

_____
Date

_____

* If you are signing as a personal representative of an individual, please describe your legal authority to act for this individual (power of attorney, healthcare surrogate, etc.).

❑ Patient/Client Refuses to Acknowledge Receipt:

_____
Signature of Staff Member Date