



University Health and Counseling Services
Division of Student Affairs

10900 Euclid Avenue
Cleveland, Ohio 44106-7046

Visitors and Deliveries
220 Sears Building

Phone 216.368.5872

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counseling@case.edu

students.case.edu/counseling

Parental/Custodial Parent Authorization to Provide Treatment

The State of Ohio requires parental permission for students under the age of 18 to counseling and psychological services. The law also allows these services to be provided without prior parental consent for up to 30 days - not to exceed more than 6 sessions. It is the policy of the University Health & Counseling Services (UH&CS) to seek parental notification and approval during the 30 day period.

Please review the following request and sign below granting permission for the UH&CS staff to provide counseling and psychological services to your minor child, who is an enrolled student at Case Western Reserve University or one of its affiliated institutions.

For a full description of our services, please visit our website at <https://students.case.edu/departments/wellness/>

Student Seeking UH&CS Services

Last Name First Name MI

Date of Birth

Parent/Custodial Parent Authorization

Last Name First Name MI

Address

City State Zip

Telephone Number Email Fax Number

I am the parent/custodial parent of the minor child named above and do hereby grant permission for them to receive counseling and psychological services from the University Health & Counseling Services of Case Western Reserve University.

Signature Date