

**The Likone Corp.**

**(dba as The Center for Confidence and Success)**

**Professional Mentoring for Youth, Teens, Young Adults and Families  
CLIENT DISCLOSURE STATEMENT  
(INFORMATION AND CONSENT)**

I am pleased you have selected me as the Mentor for, \_\_\_\_\_ your child (I am referred herein as “I”, “Your Mentor” or “Mentor”, your child is referred to herein as “your child” or “mentee” or “client” and parent or guardian is referred to as “Parent/Guardian”. This document is designed to inform you about my services and to ensure that you understand our professional relationship (the “Agreement”).

Clients I work with are psychologically and emotionally “healthy” and seek Mentoring either for difficulties due to normal life events or for growth to maximize success potential. I do not take on clients whom, in my professional opinion, I cannot help using the techniques I have available. I will enter our relationship with optimism and an eagerness to work with you. I have a special interest in helping youth and families, particularly teens and parents of teens, with academic and personal adjustment, focus and composure in school, sports and relationships, making life decisions, and families with their relationships.

I am a professional Mentor and offer methods for guiding children and teens on their journey through adolescence. These methods are primarily educational in nature, using creative and innovative ways to help teach and instill in Mentees the resiliency, mindset and life skills to be empowered and prepared for young adulthood.

**The four main aspects of growth I focus on are:**

- Developing a positive sense of self that is internally referenced and thus NOT dependent upon external factors to be sustained (Common external factors: approval of others, academic or athletic accomplishment, etc)
- Taking responsibility for one’s life and being accountable for the role one plays in life events, including how to make excellent decisions based on staying true to oneself.
- Developing extensive interpersonal communication skills essential for having healthy, positive relationships. This includes making decisions about what relationships to have and how to communicate honestly and directly, as well as learning what to take personally and what not to.
- Developing the essential tools for making and keeping a commitment to things beyond oneself, be it relationships, jobs, causes, etc.

**As the essential nature of this relationship is Mentoring and is its own unique paradigm that draws on what works from many different practices, it is essential that parents, guardians clients understand and acknowledge their understanding and acceptance of these distinctions and expectations:**

Mentor is not a licensed psychotherapist or psychologist. Mentor does not hold himself out to offer any "psychology," "psychological," "psychologist," "psychology consultation," "psychology consultant," "psychometry," "psychometrics" or "psychometrist," "psychotherapy," "psychotherapist," "psychoanalysis," or "psychoanalyst," services nor is Mentor trained, experienced, or an expert in the field of psychology. Mentor is not a licensed marriage and family therapist, that Mentor does not hold himself out to offer any psychotherapeutic techniques, nor is Mentor trained, experienced, or an expert in the field of marriage and family therapy.

Mentor does not offer clinical diagnosis nor treatment of mental illness nor does Mentor hold himself to have expertise in such areas. Client is expected to take responsibility for seeking the appropriate professional assistance in gaining input on such matters.

If Mentee is receiving any of the above mentioned psychological services, it is essential that Parent/Guardian/Client inform Mentor and together all will decide whether or not it is appropriate for Mentee to continue receiving Mentor services.

If there is any ongoing issues of substance abuse with anyone living in the home with Mentee and it is not being treated or addressed, it is essential Parent/Guardian inform Mentor and together all will decide whether or not it is appropriate for Mentee to continue receiving Mentor services.

Mentor is NOT a crisis intervention specialist nor does he represent himself as such. While Mentor is willing to offer suggestions on different ways parents/guardians can handle interventions with their youth, it is the sole responsibility of the parents to decide what will work for them and to seek out the expert opinions of those versed in crisis intervention if they feel this is what is required.

## MENTORING SERVICES OFFERED/THEORETICAL APPROACHES

The methodologies to achieve the outcomes include amongst other things, 'life coaching', educational counseling, metaphoric story telling, experiential learning, role-playing and applied Soma-Semantics in the form of the Mythogenic Self Process. It is the responsibility of the Parent/Guardian to be well versed in what these methodologies are and to ask questions to clarify for themselves what they are, how they are done and what they offer clients. Information on all these things are also on my website.

At times, Mentor may find it most effective to be challenging with client, which may include use of graphic language, profanity, or ignoring attempts by client to contact Mentor. All this will be done with intention, often to provoke a response or motivation in the client. Parent/Guardian is expected to contact Mentor if there is ever a question of interpreting what

they hear of what went on in a session and they desire more information to stay current with the work we are doing.

Mentor will provide mentoring services and discuss with Child pertinent Matters (as defined below) impacting the attitudes and behavior of Child (the "Services"). These matters may include personal, peer, academic and family relationships, substance abuse, sex, sexual preferences, school or any other matter which bears upon or impacts the pertinent issues in Child's life, from either the Child's perspective or that of the Mentor (the "Matters").

With Parent's prior permission, Mentor may escort Child on outings which may include travel by foot or car. Parents acknowledge and agree that such outings are part of the Services and mentoring process that is beneficial to the Child's welfare.

Parents acknowledge that Mentor has explained to them, prior to entering into this Agreement, that Mentor will be discussing the Matters with the Child.

Parents acknowledge and recognize that they are an integral part of the mentoring processes involved. Parents agree that they will be a) cooperative with Mentor, b) open and respectful of the mentoring process, and c) participate, together, separately, or as a family as requested. Parents further acknowledge that for the mentoring process to move forward, each party involved will be required to accept honest observations which, in some situations, may involve criticism of their attitudes and behavior. Parents understand each party must be open to change for the process to move forward.

## CONFIDENTIALITY

I regard the information you share with me with the greatest respect, so I want us to be as clear as possible about how it will be handled. As a Mentor there is no legally mandated confidentiality privilege for minors or clients with me. This agreement however offers you the right to . The privacy and confidentiality of our conversations, and my records, is a privilege of yours and is protected by state law and my profession's ethical principles, in all but a few circumstances. There are two circumstances in which I cannot guarantee confidentiality, legally and/or ethically: (1) when I believe you intend to harm yourself or another person: and, (2) when I believe a child or elder person has been or will be abused or neglected. In rare circumstances, Professional Counselors can be ordered by a judge to release information. Otherwise, I will not tell anyone anything about your treatment, diagnosis, history, or even that you are a client, without your full knowledge and usually a signed Release of Information Form,

## EXPLANATION OF DUAL RELATIONSHIPS

Although our sessions may be very intimate personally, it is important for you to realize that we have a professional relationship rather than a social one. You will likely learn a great deal about me as we work together during your Mentoring experience. However, it is important for you to remember that you are experiencing me in my professional role. If I attend your personal events – sports games, performances, family life cycle, etc - it is in the context of a professional relationship.

## LENGTH OF SESSIONS

I assure you that my services will be rendered in a professional, manner consistent with accepted ethical standards. Sessions are typically 90 minutes in duration, occasionally shorter or longer as agreed. We will schedule our sessions for our mutual agreement. If you are unable to keep an appointment please call to cancel or reschedule at least 24 hours in advance. If I do not receive such advance notice, you may be responsible for paying for the session that you missed. Please note that it is impossible to guarantee any specific results regarding your mentoring goals. However, together we will work to achieve the best possible results for you.

## FEES/METHODS OF PAYMENT

Fees. Parents shall pay Mentor a fee of \_\_\_\_\_. Payment of fees is due and payable upon receipt of each billing statement. A late payment fee of twelve percent (12%) per month may be added to all statements remaining unpaid more than thirty (30) days after the billing date.

## BILLING/INSURANCE REIMBURSEMENT

If you wish to seek reimbursement for my services from your health insurance company, I will be happy to complete any forms related to your reimbursement provided by you or the insurance company **BUT WHETHER OR NOT THE MENTOR FEE IS REIMBURSABLE IS BETWEEN YOU AND YOUR INSURER.**

Some health Insurance companies will reimburse clients for my Mentoring services and some will not. Those that do reimburse usually require that a standard amount be paid by you before reimbursement is allowed, and then usually only a company representative can determine whether your insurance company will reimburse you and about what schedule of reimbursement will be used. However, please, remember that you are responsible and not your insurance company for paying these fees agreed upon.

## COMPLAINT PROCEDURES

If you are dissatisfied with any aspect of our work, please Inform me immediately. This will make our work together more efficient and effective.

The Parties will first try to resolve in an amicable manner any dispute or disagreement which may arise under, or as a result of, or in any way relates to, the interpretation, construction or application of this Agreement between Mentor and Parents. The Parties shall so endeavor to resolve said dispute or disagreement within ten (10) business days from the receipt of the first written notice given pertaining to the dispute in question. If you think that you have been treated unfairly or unethically, by me or any other Mentor, and cannot resolve this problem with me then the Parties hereto agree that any and all disputes, disagreements, claims, or controversies arising

out of or relating to the Agreement shall be submitted to the Judicial Arbitration and Mediation Service ("JAMS") or its successor, for mediation, and if the matter is not then resolved after ten (10) business days after the mediation is held, then it shall be submitted to JAMS, or its successor, for final and binding arbitration. The mediation and, if applicable, the subsequent binding arbitration will take place in San Francisco, California (unless the Parties mutually agree to an alternative venue) before a single experienced arbitrator experienced in the field of mentoring who is licensed to practice law in California and selected in accordance with the then current arbitration rules and procedures for disputes governing arbitrations administered by JAMS. The prevailing party in any arbitration award, or the non-dismissing party in the event of a voluntary dismissal by the party instituting the action, shall be entitled to the full amount of all reasonable expenses, including all arbitration fees and actual outside attorneys' fees paid or incurred in good faith.

This Agreement shall be interpreted under the laws of the State of California.

If you have any questions, feel free to ask. Please sign and date both copies of this form and by doing so, acknowledging your understanding and acceptance of the terms and conditions of this relationship, the methodologies and A copy for your records will be returned to you. I will retain a copy In my confidential records.

\_\_\_\_\_ **Date** \_\_\_\_\_

**Mentor's signature - Jeffrey Leiken, Mentor**

\_\_\_\_\_ **Date** \_\_\_\_\_

**Client/Guardian signature**

**If divorced and have joint custody agreement, both parties must sign:**

\_\_\_\_\_ **Date** \_\_\_\_\_

**2<sup>nd</sup> Custodial Client/Guardian signature**