* indicates a required field

** Connected Counseling provides therapy to individual adults and adolescent males. We are currently unable to see couples or children. **

* What type of counseling services are you interested in?

- Individual Adult
- Male Adolescent 12 and Older
- Dependent Adult

*** Unfortunately, we are not able to accept Medicare/Medicare Supplements, Medicaid, or State Funded plans like IlliniCare, Meridian, and Community Blue Cross/Blue Shield. To search for therapists in our area who can bill to these agencies, it's best to use pyschologytoday.com ***

* How will you be paying for the services?

- Self Pay
- Health Insurance
- Employee Assistance Program/Workplace Funded
- Other

* What is the client's first and last name?

* What is the client's birthdate?



* What is the client's gender?

~

Does the client identify as another gender?

Yes

No

* What is your email address?

* What is your telephone number?

* Can I text to this phone number?

Yes

No

* Before we set up an appointment, it would help to know a little about the issues you are dealing with. In a few sentences, can you give me an idea of what is going on that has made you decide to get counseling right now?