

Jordan Hart, Ph.D.  
5353 Wayzata Blvd, Suite 403  
St. Louis Park, MN 55416  
Phone: 612-479-3887 Fax: 612-486-8701

**AUTHORIZATION FOR THE RELEASE OF CLINICAL INFORMATION**

Client Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

I authorize Jordan Hart, Ph.D. to: disclose to \_\_\_\_\_ obtain from \_\_\_\_\_ exchange with \_\_\_\_\_

\_\_\_\_\_  
(Person or organization to whom information is to be shared with or received from)

\_\_\_\_\_  
(Address/phone/fax number)

The following information will be used for the purpose of:

Treatment planning and provision \_\_\_\_\_ Coordination/Continuity of care \_\_\_\_\_ Other \_\_\_\_\_

Check all that apply:

_____ Consultations by phone, email and/or in person	_____ Progress Notes
_____ Psychological Evaluation/Testing Reports	_____ Diagnostic Assessment
_____ School Achievement & Behavioral Reports	_____ Client Status/concerns
_____ Discharge/Treatment Summary	_____ Other
_____ Medical/Psychiatric Records/Reports/Evaluation	

This information has been disclosed to the above person, organization, or agency from records whose confidentiality is protected by Federal law and rules (42 CFR, Section 2) and by Minnesota Statutes. Federal regulations prohibit the above person, organization or agency from making any further disclosure of this information without my prior written consent. I understand that I have no obligation whatsoever to disclose any information from my record and I may revoke this consent at any time by notifying Jordan Hart, Ph.D., L.P. in writing; and/or specifying a date, time, event or condition upon which my consent will expire. I have had this form explained to me and I understand its contents.

\_\_\_\_\_  
(Client signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of responsible party – parent, legal guardian, or authorized representative when applicable)

\_\_\_\_\_  
(Date)

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

\*This authorization expires on the “expiration date” provided above or one (1) year after this authorization is executed if no expiration date is provided