



Counseling Fee Subsidy Application

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About Counseling Fee Subsidies

Four Winds provides a limited number of fee subsidies available to clients, based on financial need. If you would like to be considered for a fee subsidy, please complete all the information on this sheet and return it to the Four Winds office. Processing scholarship requests typically takes about 1 week, after which we will notify you regarding the outcome. Include additional comments/questions on the back of this form.

Name: _____

Phone: (_____) _____ May we leave a message here: Yes No

Email Address: _____ May we send a message here: Yes No

Including you, how many adults live in your home? _____

Number of children under your care: _____ Ages: _____

On a scale of 1 to 10 (1 being least distressing and 10 being most distressing), how would you rate the problem(s) for which you are seeking counseling? _____

Briefly explain your counseling need. (Put "confidential" if it is a private matter.)

Are you a current Four Winds patient? Yes No

If yes, who is your counselor?

If no, do you have a counselor preference?

Monthly Income: _____
Other Income: _____
Total Monthly Income: _____
Monthly Expenses: _____

What could you afford? \$_____ per session and _____ sessions per month
(Each counselor sets his/her own fees, with normal fees ranging from \$100-175 per session.)

I acknowledge that all information provided on this form is both accurate and complete.

Signature: _____ Date: _____

OFFICE USE ONLY		Date Received:
<input type="checkbox"/> Subsidy Approved		<input type="checkbox"/> Subsidy Denied
Discount Rate: _____		Reason: _____
Period (choose one):		
<input type="checkbox"/> _____ # of sessions		
<input type="checkbox"/> Until date _____		
<input type="checkbox"/> Until further notice		
Counselor Signature: _____		Date: _____