Speech and Language Clinic Intake Form

Faculty of Health Sciences

For more information or to request alternate formats of this form for accessibility, please contact speechandlanguageclinic@durhamcollege.ca

The college will contact you to confirm your acceptance, session dates and times for attendance. Intakes will be contact as spaces become available in groups throughout the year. Waitlists will be maintained if demand exceeds spaces and you will be contacted and prioritized based on the date the referral was received.

Client Information

First Name: Last Name:

Gender: Please Select One Age of Client:

Email Address: Telephone Number:

Street Number: Street Name:

Unit Number: City: Province: Postal Code:

Medical Information

Please list all medical diagnosis:

Main reason for seeking treatment / areas of concern:

Are you receiving or have you received other therapy services? If so, please provide a summary of those services:

Referral source (how did you hear about this program):

Guardian Signature

☐ I understand that this service is intended for children with speech language delays who consent to and can actively participate in therapy with CDA students under the direction of an SLP. A waitlist will be created and maintained. The college will contact you to confirm your acceptance, group dates and times for attendance

First Name: Last Name:

Date: 9/13/23 Signature:

Notice of Collection

In accordance with Section 39(2) of the *Freedom of Information and Protection of Privacy Act*, 1990, the personal information collected on this form is collected under the legal authority of the Ontario Colleges of Applied Arts and Technology Act, 2002 and may be used and/or disclosed for use with Health Services. Your personal information may also be used for various administrative, statistical and/or research purposes of the College and/or ministries and agencies of the Government of Ontario and the Government of Canada. If you have any questions about the collection, use and disclosure of your personal information by the College, please contact the Freedom of Information and Protection of Privacy Coordinator, 2000 Simcoe Street North, Oshawa, ON, L1G 0C5, 905.721.2000 ext. 3292.