

**UNIVERSITY OF CALIFORNIA, SAN DIEGO
PSYCHOLOGICAL AND COUNSELING SERVICES
9500 Gilman Drive MC 0304
La Jolla, CA 92093-0304
(858) 534-3755/FAX (858) 534-2628**

ACKNOWLEDGMENT OF NOTICE OF PRIVACY PRACTICES

The Psychological and Counseling Services Notice of Privacy Practices provides information about how we may use and disclose protected health information about you.

In addition to the copy we will provide you, copies of the current notice are available by accessing our website at <http://psychservices.ucsd.edu> and may be obtained at our Central Office at 190 Galbraith Hall.

I acknowledge that I have received the Notice of Privacy Practices.

Signature of Client or Client's Representative

Date

Print Name

Student ID

Interpreter (if applicable) _____

Relationship to Client _____

WRITTEN ACKNOWLEDGMENT NOT OBTAINED

Please document your efforts to obtain acknowledgment and reason it was not obtained.

- Notice of Privacy Practices Given – Client Unable to Sign
- Notice of Privacy Practices Given – Client Declined to Sign
- Notice of Privacy Practices and Acknowledgment Mailed to Client
- Other Reason Client Did Not Sign _____

Signature of PCS Representative

Date

Print Name