

Dr. Brad S. Broeder
Clinical & Forensic Psychologist
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PERSONAL AUTHORIZATION

& CONSENT For PARTICIPATION

In the COLLABORATIVE DIVORCE PROCESS

I, _____, on this date, _____, do hereby grant permission for myself to fully and honestly participate in the collaborative process. This process can include several joint, individual and conjoint sessions and meetings with Dr. Broeder, who is designated as the team **'Facilitator'**.

I understand that Dr. Broeder is a clinical and forensic psychologist, licensed in the States of Florida & New York. I understand that Dr. Broeder, serving as the ***Team Facilitator***, will adhere to and uphold the ethical standards set forth by the American Psychological Association and the rules under Chapter #490 in the Florida Statutes.

I understand that by granting 'consent' for this undertaking that I am voluntarily entering into a contractual arrangement with Dr. Broeder. I further understand that I am agreeing to fully participate and that Dr. Broeder will be serving not only my specific interests but rather that he will be in a position of complete 'neutrality' not to advocate for or against me. Yet, in this process it is his job to facilitate, foster, direct and guide the collaborative process to assist me and my family in achieving our joint and mutual goals during this transitional period of our lives.

By virtue of my choosing to work with Dr. Broeder for such 'collaborative services' I recognize that **I am granting consent for myself and, if applicable, my child(ren)**, for any and all psychological services to be rendered under his supervision and guidance. Furthermore, I understand that Dr. Broeder works from a retainer fee-agreement and that the amount of **\$3,000** is due at the time of the first or initial appointment. I further acknowledge that I am fiscally responsible for my share of all charges levied for such services. These charge(s) may include time spent on the telephone, email correspondence and/or consultations with collateral sources, including my attorney, as well as members of the 'Collaborative Team'. In addition, ***there is a twenty-four, (24) hour cancellation policy*** in effect, indicating that with less than twenty-four (24) hours notice that I will be charged for that missed or canceled appointment time. The retainer fee may be paid by check, cash or money order. If you prefer to pay by credit card please understand that there is a .0375% processing fee added into the total amount due.

Participant's signature: _____ **.Date:** _____.

Participant's Full Name: _____ .

Address: _____ . **Zip:** _____ .

Contact: Home #: _____ ; **Work #:** _____ ; **Cell #:** _____ .

Age: _____ . **Birth Date:** _____ . **E-mail:** _____ .

Educational Background: _____

_____ .

What was/is your job or career position? _____

_____ .

Is this your first marriage? _____ ; **If 'No', please explain what happened during your prior marriage?** _____

_____ .

Where & How did you and your spouse meet? _____

_____ .

Anniversary Date: _____ . **Did you discuss having children?** _____

_____ .

Please provide the names, date(s)-of-birth & age(s) for your child(ren):

Please provide the school, grade level and current academic standing for your child(ren):

Whose decision was it to get divorced and how was it presented to you or presented to your spouse?

What would you say were/are the three (3) main reasons for getting a divorce or, for your spouse wanting to get divorced?

How did you folk discuss or present the idea of getting divorced to your child(ren)?

How would you describe your child/children's reaction(s) to your decision to divorce?

Are you, your spouse or your child(ren) currently involved in any psychological or counseling service(s)? (If yes, please provide contact information):

From your perspective what are some of the stumbling blocks in the marriage?

What are you most interested in achieving or establishing in this collaborative process?

What would be a reasonable settlement from your vantage point?

How would you describe your spouse's personality? (Please use other side of this page if you require additional space for your answer):

How would you describe your personality?

How would you characterize the style of communication that you and your spouse have shared over the years?

What, if anything, had changed with respect to your style of shared communication?

Are there or, have there ever been any concerns with substance use or abuse by either you or your spouse/partner?

Are there or, have there ever been any experiences of trauma or abuse by anyone in your family?

Has there ever been an allegation of domestic violence or a call from child protective services?

Is/Are your child(ren) having any specific developmental, behavioral or psychological issue(s) that the TEAM should be aware of?

Thank you for your openness & honesty.

Signature: _____ . Date: _____ .