

# New Therapist Checklist

## Therapist / Practice Name:

Website:

Waiting List?  Length:

Online Booking?

## Referral Source:

Comments:

## Fees / Reimbursement

Rate/Hr: Tax Included?

Sliding Scale Available If Needed?

Therapist's Credential:

Covered by Insurance / Extended Health?

Yearly Insurance Maximum \$ :

## Location

Convenient to Home

Convenient to Work

Walkable

Safety of Neighbourhood

Transit-Friendly

Bike Parking

Car Parking  Cost:

Phone sessions (if important)

Online/Skype (if important)

## Free Consultation Available?

Length: Date/Time:

Office  (address: \_\_\_\_\_ ) Phone  (number: \_\_\_\_\_ )

Comfort With Office: 0-5 \_\_\_\_\_ Has a Waiting Room  Therapist On Time

Therapist Made Me Feel Welcome: 0-5 \_\_\_\_\_ Answered My Questions: 0-5 \_\_\_\_\_

Gut Feeling About the Therapist: 0-5 \_\_\_\_\_

Questions For The Therapist:

Comments:

## Important To Me

Accessible Office  Acc.Washroom

Inclusive Washroom

LGBTQ+ Friendly Therapist/Office

Anti-Oppressive  Poly-Friendly

Feminist/Interseccional  Sex +

Body-Positive  Baby Change Tables

## Therapist Factors

Experience With My Concerns:

Years in Practice \_\_\_\_\_ Gender if Important \_\_\_\_\_

Highest Education/Degree \_\_\_\_\_

Responsive to Messages/Calls: 0-5 \_\_\_\_\_

Helpful / Informative Website: 0-5 \_\_\_\_\_

Profile Appeal: 0-5 \_\_\_\_\_