



Franciscan Life Process Center
Music Therapy
Application for Observation

Name: _____

Parent's name (if under 18): _____

Address: _____

Email: _____

Home phone: _____

Mobile phone: _____

School/University: _____

Source of referral: _____

Reason(s) for observation/interview:

By signing this application, I agree to uphold all confidentiality policies of the Franciscan Life Process Center and American Music Therapy Association's Code of Ethics, including but not limited to client's name, race, ethnicity, sex, diagnosis or any other specific descriptors that are divulged during observation. I will provide for my transportation needs and I will dress professionally when visiting.

Signed: _____ Date: _____

Please email application (prior to observation date) to:

Sandy Koteskey, MT-BC

Assistant Director of Music Therapy

skoteskey@lifeprocesscenter.org

An excerpt from the American Music Therapy Association (AMTA), Code of Ethics:

3.0 Relationships with Clients/Students/Research Subjects

3.1 The welfare of the client will be of utmost importance to the MT.

3.2 The MT will protect the rights of the individuals with whom he/she works. These rights will include, but are not limited to the following:

- - right to safety;
- - right to dignity;
- - legal and civil rights;
- - right to treatment;
- - right to self-determination;
- - right to respect; and
- - right to participate in treatment decisions.

3.3 The MT will not discriminate in relationships with clients/students/research subjects because of race, ethnicity, language, religion, marital status, gender, gender identity or expression, sexual orientation, age, ability, socioeconomic status or political affiliation.

3.4 The MT will not exploit clients/students/research subjects sexually, physically, financially or emotionally.

3.12 Confidentiality

3.12.1 The MT protects the confidentiality of information obtained in the course of practice, supervision, teaching, and/or research.

3.12.2 In compliance with federal, state and local regulations and organizational policies and procedures, confidential information may be revealed under circumstances which include but are not limited to:

- a. when, under careful deliberation, it is decided that society, the client, or other individuals appear to be in imminent danger. In this situation, information may be shared only with the appropriate authorities, professionals or others. The client is made aware of this when possible and if reasonable.
- b. when other professionals within a facility or agency are directly related with the case or situation.
- c. when the client consents to the releasing of confidential information.
- d. when compelled by a court or administrative order or subpoena, provided such order or subpoena is valid and served in accordance with applicable law.

3.12.3 The MT informs clients of the limits of confidentiality prior to beginning treatment.

3.12.4 The MT disguises the identity of the client in the presentation of case materials for research and teaching. Client or guardian consent is obtained, with full disclosure of the intended use of the material.

3.12.5 All forms of individually identifiable client information, including, but not limited to verbal, written, audio, video and digital will be acquired with the informed client or guardian consent and will be maintained in a confidential manner by the MT. Also, adequate security will be exercised in the preservation and ultimate disposition of these records.

3.12.6 Information obtained in the course of evaluating services, consulting, supervision, peer review, and quality assurance procedures will be kept confidential.

As an “observer” of Music Therapy: I have read and agree to uphold the AMTA Code of Ethics.

Signed: _____ Date: _____