



I completed my Master's in 2020 in Clinical Mental Health Counseling with a specialization in addictions counseling from Grand Rapids Theological Seminary. Previously, I earned a Bachelor's in Counseling Psychology from Cornerstone University. I am currently licensed as a Limited Licensed Professional Counselor (LLPC) in the state of Michigan, and I am also certified as an Advanced Alcohol and Drug Counselor (CAADC) through the Michigan Certification Board for Addiction Professionals (MCBAP). I am practicing under the supervision of Ann Holland, LPC, to ensure that clients receive the best care possible. I work with individuals struggling with a wide range of substance use disorders as well as anxiety, depression, trauma, and general life issues/transitions. I uphold the ethical standards of the American Counseling Association (ACA).

Counseling is an explorative, analytical, and collaborative process based on theory as well as a strong therapeutic relationship. It is my goal to provide clients with a safe and trusting environment in which their strengths, weaknesses, desires, and fears can be thoroughly explored. Instead of simply give advice, I will join with you on a meaningful journey of self-exploration.

Throughout this journey, we will unpack how your physical, emotional, intellectual, and spiritual selves interact and influence each other as a whole person. It should be noted that the term "spiritual" is not connected to any particular set of religious beliefs; rather, it refers to a broader sense of discovering meaning, purpose, and serenity. Utilizing an eclectic style of counseling, I draw from various theories of counseling to inform my practice. Primarily, I utilize cognitive-behavioral, solution-focused, rational-emotive behavioral, and Gestalt techniques along with motivational interviewing.

I view every client as an individual with immeasurable worth, deserving of the help they desire and need. Our sessions will likely involve sensitive topics. Clients can be assured that what they share in session is confidential and protected by HIPAA. Client information will not be shared with anyone else without written permission except in cases involving potential harm to oneself or another; actual or suspected incidences of child, elder, or dependent adult abuse or neglect; and court orders/subpoenas.

Under normal circumstances, my fee is \$135 per session. Payment is due at or before the time of service. Prolonged overdue balances may impact and/or interrupt the therapeutic process. Under some circumstances, privately paying clients are able to submit a receipt to their insurance company

for full or partial reimbursement, based on the client's individual health care provider and plan. Real Life Counseling also employs a sliding fee scale based on family income and size. In the event that RLC is submitting for insurance provider reimbursement, this document constitutes your consent of communication concerning the client to the appropriate insurance providers for the purposes of reimbursement.

There is a 24-hour notice required for any cancellations. Additionally, your session will be forfeited if you arrive more than 15 minutes late for your scheduled appointment. If you fail to cancel an appointment 24 hours or more advance, or if you are more than 15 minutes late for your appointment, you will still be responsible for covering the cost of the appointment.

It is my goal to see clients are satisfied throughout the the counseling experience. If you feel dissatisfied during the counseling process, please bring this to my or my supervisor's attention. All concerns are handled seriously. You may submit a formal complaint to the State Licensing Board: Michigan Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing, Investigations & Inspections Division, P.O. Box 30670, Lansing, MI 48909, (517) 241-0205

Supervision Acknowledgement

I agree to supervise Brandon Mielke license number 6451019207 for the required post-degree counseling experience. Supervisor: Ann Holland, LPC license number 6401011197. If you have any questions or require clarification regarding any of the above information, please contact me.

I affirm that I have read and understand the policies and procedures found in this document.

Client's Signature

Printed Name

Parent or Guardian's Signature

Printed Name

Counselor's Signature

Brandon Mielke, MA, LLPC, CAADC
Printed Name