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 www.Micounselinggroup.com  
 Michigan Department of Licensing & Regulatory Affairs License No. SA0500480

Name: \_\_\_\_\_ Case# \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

D.O.B: \_\_\_\_\_ Home # \_\_\_\_\_ Cell# \_\_\_\_\_

Referring Agency & Officer: \_\_\_\_\_

Send Results To: \_\_\_\_\_

(Please include email and/or fax number)

Report to testing site by: \_\_\_\_\_ (if blank within 48 hours) Duration of testing: \_\_\_\_\_

Instant Screens	Per Month	Per Week	Lab Screens	Per Month	Per Week
1 Panel please circle: ETG, THC, COC, mAMP, OPI, BUP, BZO) \$10			6 Panel \$20		
6 Panel (THC, COC, MOP, MET, BZO, OXY) \$15			12 p w/ETG \$30		
8 Panel includes ETG (ETG, BUP, BZO, COC, MAMP, MOP, OXY, THC)\$18			12p w/ETG auto confirm for levels \$40		
12 Panel \$20			8 p w/ETG auto confirm for levels \$25		
PBT \$5			ETG \$25		
Other: _____			Other: _____		

Prevention Classes	Cost	Circle class
1 Day (4 Hours)	\$75	AOD-Retail Fraud-Marijuana- Anger
8-12 Week Alcohol and Other Drugs(AOD)	\$40/Session	
Domestic Violence up to 52 weeks, state usually has a min. 26 weeks	\$40/Session	How Many: _____
Anger Management 8-52 weeks	\$40/Session	How Many: _____
<b>Counseling</b> individual sessions:	<b>Insurance or sliding scale fee</b>	How many: _____ Freq: _____
<b>Assessment's</b> (Anger, Substance Abuse, Mental Health)	\$150-200	

\*\$25 intake fee will be charged at first visit. This is a one-time fee \*Photo ID must be provided at intake  
 \*Cash or card accepted for services \*If on medication please bring list or bottles \*Call for list of insurances accepted for counseling services