



185 Chateau Drive, Suite 102
Huntsville, AL 35801
256-489-1583 (phone)
256-489-1595 (fax)
office@silverliningsclinic.com

Referral Form

Referring Source Name: _____ Referring Source Phone: _____

Patient's Name: _____ DOB: _____

Parent/Guardian's Name: _____ Patient Preferred Phone Number: _____

Complete Address: _____ City/St/Zip _____

Insurance Carrier: _____ Insurance Policy Number: _____

Insurance Policy Holder Name: _____ Insurance Policy Holder DOB: _____

Requested Service (Please Circle One):

- Psychological/Neurodevelopmental Testing (Choose Principle concern)
 - Autism ADHD Learning/Academic Mood/Personality
 - Other _____
 - Counseling (Individual, Therapy, Family, PCIT (Parent/child interactive training); Parenting skills, CBT, EMDR, Group
 - Speech Evaluation/Therapy/Feeding Services/Auditory Processing/Treatment/Individual &/or Group
 - ABA Consulting / Tutoring; Limited ABA autism behavioral (in office, home or school setting)
 - IEP or School help
 - Consultation only
- Please specify a provider** **OR** **No Preference**

PSYCHOLOGISTS(S)

Dr. Megan Crisler, PhD	12 months – adult
Dr. Heather Wadsworth, PhD	12 months – 21 years
Dr. Kristen Coln, PhD	12 months – 16 years
Dr. Amber Hasty-Mills Pys.D.	18 months – 21 years
Dr. Emily Gibson , PhD	4 years - 21 years

COUNSELING

Miriam Gardner, LPC	older teen - adult
Dawn Hazel, ALC	adults
Katie Odom, LPC-MHSP,	adults
John Lawson, LCSW, RPT	3-17 & family

BEHAVIOR & SPEECH + OT

Holly Sharpe, M.Ed., BCBA	all ages
Jenn Saliba, CCC-SLP	all ages

Return fax number for appointment notification: _____

Appointment Date: _____ Appointment Time: _____

Scheduling notes (Office Use Only): _____
