

## **Theraplay, Inc.**

### **OBSERVER REQUIREMENTS**

- A high school student or peri-professional interested in the allied health care field
- Observation time is limited to 1 day or less
- Time in clinic is observation only –and cannot interact nor actively participate in session
- Observers may still be asked to assist in office or within session for toy/equipment collection or clean up
- Observers do not need to obtain an FBI clearance to complete the observation
- A tour and orientation to the facility are not required
- Only form required to be completed is the observer information sheet
- HIPPA Guidelines do need to be explained and a HIPPA Training Sheet needs to be completed by observer and trainer

**Theraplay, Inc.**

**Observer Information Sheet**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Areas of Interest/Reason for Observation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Related Experiences: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Date and Time of Observation: \_\_\_\_\_

Observation completed with the following therapists:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Observer Signature: \_\_\_\_\_ Date: \_\_\_\_\_