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: _____________