



Speech-Language Clinic
5500 Campanile Drive, San Diego, CA 92182-1518
619.-594.7747
FAX: 619.594.7790/619.594.5917

Dear Parent or Guardian,

Thank you for contacting the Speech-Language Clinic at San Diego State University. The clinical program provides assessment and intervention to individuals of all age groups with all types of speech and language disorders and is accredited by the American Speech-Language-Hearing Association (ASHA). The program exists to train graduate students in speech-language pathology and audiology. These students are supervised by ASHA-certified and state-licensed speech-language pathologists and audiologists who are employed by the University.

Clinic sessions are held each academic semester, fall, spring and summer. The fall and spring sessions are approximately 11 to 12 weeks long. The summer sessions are 8-9 weeks long. In order to reach more clients in the community, the Speech-Language Clinic does not charge fees for its services. We do accept donations to help support the Clinic. Information regarding donations can be found on our website (<http://slhs.sdsu.edu/speech-language-clinic/>).

Enclosed are four forms: the **Initial Application Form**, the **School Information Form**, the **Medical Information form**, and the **Authorization Form**. These must be completed and returned to us as soon as possible, so that we can schedule your child for our services. Specific instructions follow:

1. Please fill out the **Initial Application Form** as completely as you can and return it in the enclosed self-addressed envelope. The more detailed the information you give us, the better our understanding of your child's speech-language needs. If you have completed a Multi-Agency Intake Questionnaire, you may send us a copy instead of completing the initial application form.
2. The **School Information Form** must be completed by the school personnel best acquainted with your child: his/her teacher, the school speech pathologist, etc. If your child is not enrolled in any formal school setting, you may ignore this form (but we do count Day Care).
3. The **Medical Information Form** must be completed by the child's physician. If the child has seen a physician in the past year, you do not need to make another appointment. The physician can fill out the form based on that physical, and mail it to our clinic.
4. Please complete the **Authorization to Secure Information from Outside Agency**. This will allow us to contact your school, hospital, primary care physician, previous/current Speech-Language Pathologist, or anyone else who could assist us with information.

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If your child has recently been evaluated or treated for a speech-language problem, please include a copy of the most recent Speech-Language report. This is very important as we need specific and current information to meet your child's individual needs.

If your child has not been seen recently by a speech-language pathologist, either for an evaluation or for therapy, or the information we receive is incomplete or not current, we will contact you by telephone to schedule an appointment as soon as one becomes available. We may require that an evaluation be scheduled prior to placement in therapy to better meet both your needs and the training needs of our graduate student clinicians.

Please note that as services become more difficult to obtain in the community, we have many more clients seeking assistance than we are able to accommodate. We will do our best to accommodate you and your schedule, but application does not guarantee placement. We appreciate your understanding.

Once again, thank you for your interest in the SDSU Speech-Language Clinic. We look forward to meeting and working with you and your child.

Sincerely,



Carrie Goodwiler, M.A., CCC-SLP
Speech-Language Clinic Director

The SDSU Speech-Language Clinic does not discriminate in the delivery of professional services on the basis of race or ethnicity, age, religion, national origin, sexual orientation, disability or ability to pay. Placement into our intervention program is based on student training needs, space availability and supervisor recommendations.

Form 1.b.1 (rev. 7/22)