



# Amanda DeVillez, PsyD, PLLC

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## Forensic Informed Consent Contract

This Forensic Psychological Evaluation is being conducted at the request of the Public Defender's Office, Alternate Public Defender's Office, the Court presiding over your case and/or your criminal defense attorney and is therefore somewhat different than other psychological services. It is important for you to understand how a forensic evaluation differs from more traditional psychological evaluations.

While the results of this evaluation may or may not be helpful to you personally, the goal of this evaluation is to provide information about how you are functioning psychologically to the individual or agency requesting the evaluation.

In most cases, this evaluation is intended for use in some type of a legal proceeding. As such, the confidentiality of the evaluation and the results is determined by the rules of that legal system. If your attorney has requested this evaluation, they will receive a copy of my report and will control how it is to be used and who has access to it.

Normally, the results of this evaluation are protected by the attorney-client privilege. Exceptions to this might include a determination on my part that you are dangerous to yourself or another person or if you reveal information that a minor or vulnerable adult has been abused. I would also have to release this information if a court orders me to do so. There may be other examples where the laws require me to release the information obtained during the evaluation. We will discuss these situations on a case-by-case basis. If this evaluation is ordered by the Court, the Judge presiding over your case, the prosecution, and your attorney will receive a copy of my report.

Once a decision has been made to use the report in a legal proceeding, the report and any information pertaining to it will probably be admissible into evidence as well

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as any other information that was provided concerning your mental health and functioning. If you have any concerns about the use or distribution of my report, you should discuss these issues carefully with your attorney.

The individual/entity requesting the evaluation is my client and they have complete authority over the results, including whether or not any information will be released to you or to anyone else. In addition, because the evaluation was requested by another party, and is not for the purpose of treatment or counseling, the confidentiality may have fewer legal protections. I will not release the information unless instructed to do so by the person or entity that hired me or when I am legally required to do so.

Your participation in this evaluation is voluntary. I will not conduct the evaluation without your signature on this document. You also have the right to stop the evaluation at any time. There may be legal consequences if you stop the evaluation; therefore, it would be in your best interest to consult with an attorney before doing so. In addition, if appointments are not kept or are cancelled within 24 hours of the appointment time, the person requesting the evaluation may incur charges for the unused time that has been set aside for these services.

The evaluation itself may consist of two separate parts: an oral interview and psychological testing. In addition, it may be necessary for me to review other related materials such as court records, depositions, transcripts, medical records, County Human Services Agency's (HSA) Child Protective Services (CPS) records, etc.

If, at any time, you have a question about any aspect of the evaluation or these procedures, please feel free to ask me. In addition, if at any time you need a break from the evaluation, please let me know and we will stop.

## CONSENT AND AGREEMENTS

I have read and agree to the above.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date