**Professional Disclosure Statement**

**Mona Mirpour, Professional Counselor Associate**

Supervisor: Karina Pierce, LPC

Dr. Sanderson and Associates

11845 SW Greenburg Rd Suite 210, Tigard, OR 97223

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**Philosophy and Approach:** I believe in creating a welcoming environment with patients in which we can collaboratively understand their circumstances and work toward their goals. Together, we can take steps to create positive changes to improve overall quality of life. I am committed to seeing each person’s unique circumstances and adjusting treatment to fit their needs. My general counseling approach utilizes evidence-based cognitive-behavioral techniques such as exposure and response prevention (ERP), dialectical behavior therapy (DBT), acceptance and commitment therapy (ACT), and motivational interviewing (MI).

**Formal Education and Training:** I hold a master’s degree in applied clinical psychology from Pacific University. Major course work included cognitive-behavioral intervention theory and practice, assessment, group dynamics, career counseling, diagnosis, cultural foundations, psychoactive substances, development, professional orientation and ethics, biological and cognitive foundations, and social and systems foundation.

As a Registered Associate with the **Oregon Board of Licensed Professional Counselors and Therapists (Board), I abide by its Code of Ethics**. I am supervised by Karina Pierce, a licensed professional counselor, which I will be happy to explain.

**Fees:** My fee is $135 per hour for individual sessions, $50 per hour for group sessions.

As a client of an Oregon Registered Associate, you have the following rights:

• To expect that a registered associate has met the qualifications of training and experience required by state law.

• To examine public records maintained by the Board and to have the Board confirm credentials of a registered associate.

• To obtain a copy of the Code of Ethics.

• To report complaints to the Board.

• To be informed of the cost of professional services before receiving the services.

• To be assured of privacy and confidentiality while receiving services as defined by rule or law, with the following exceptions: 1) Reporting suspected child abuse; 2) Reporting imminent danger to you or others; 3) Reporting information required in court proceedings or by your insurance company, or other relevant agencies; 4) Providing information concerning associate case consultation or supervision; and 5) Defending claims brought by you against me.

• To be free from being the object of discrimination on any basis listed in the Code of Ethics while receiving services.

You may contact the Board of Licensed Professional Counselors and Therapists at: 3218 Pringle Rd SE, #120, Salem, OR 97302-6312 │ Telephone: (503) 378-5499

Email: [lpct.board@mhra.oregon.gov](about:blank)

Additional information about this registered associate is available on the Board’s website: [www.oregon.gov/OBLPCT](about:blank).