**Service-level Agreement**

# Agreement

This agreement is entered into by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (counsellor/psychotherapist, and ALPS on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date dd/mm/yyyy).

It is understood that the above-named is agreeable to serving on the Counselling Panel to whom ALPS may refer clients from time to time.

Referrals to the above-named counsellor/psychotherapist will be subject to ALPS Terms and Conditions for Panel Membership.

# Service Delivery

The counsellor’s signature on this agreement denotes that the above-named counsellor has read, understood, and agreed with the Terms and Conditions for Panel Membership.

The counsellor agrees to be bound by the Terms and Conditions of ALPS Panel Membership.

# Problem Resolution

Issues with ALPS or ALPS Service should be reported to Ronan Gilchrist (Manager).

ALPS will formally respond within 48 hours and will act to resolve the issue within five working days. Please see ALPS Complaints Policy.

# Agreement Renewal

This Service-level Agreement will be renewed in January of each year when counsellors will also be asked to provide updated documentation.

I agree to abide by the Terms and Conditions of ALPS Panel Membership, which I have read and understand.

Sign\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Counsellor’s signature

Sign\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 ALPS