

Professional Disclosure Statement

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My Qualifications

I specialize in adult, child, and couples and family counseling. I earned my M.A. in Teaching (2018) with a specialization in Early Childhood Education at Marian University in Indianapolis, Indiana. I have three years of training as a child and family educator working extensively with children ages 3-5 and families experiencing economic, food, and employment instability. I have experience in behavior and conflict management, and social-emotional psychoeducation. Currently, I am in the process of earning my M.A. in Clinical Mental Health Counseling at North Carolina Central University. My professional standards strictly adhere to the American Counseling Association Code of Ethics.

Clinical Supervision

I am currently under supervision as a Student Counselor completing the Internship field experience to meet the requirements for graduation and professional licensure. I am employed part-time with Eagle Counseling, Consultation, and Research Clinic under the supervision of Malaika M. Edwards, MS, LCMHC. Ms. Edwards can be reached Monday-Thursday via phone at (919) 530-7666 or email medwar82@nccu.edu.

Counseling Background

I serve a wide range of couples and families, children, adolescents, and adults. My areas of focus include stress management, life transitions, identity development, trauma, grief and loss, depression, anxiety, coping with oppression, and relationship issues. I have affirming, culturally-competent training in the following areas: transgender and gender-nonconforming individuals across the lifespan, multicultural and social justice issues, ethnically and economically diverse couples and families, military families, queer identified couples and families, and multi-ethnic/racial couples and families.

I believe that you are the expert of your life. I meet you with respect, empathy, and authenticity. My therapeutic orientation is rooted in relational-cultural theory, attachment theory, and psychodynamic approaches. In addition, my counseling approach includes: Solution-focused therapy, Narrative theory, play therapy, somatic counseling, and Brainspotting therapy. Lastly, I prioritize a trauma-informed approach in all aspects of therapy. My therapeutic techniques are evidence-based and suited to your particular needs in counseling. We will discuss which approaches fit you and your family.

Session Fees and Length of Service

The typical length of sessions is 50 minutes. Eagle Counseling Clinic uses a sliding scale of \$0 - \$30 and accepts cash, check, and credit cards.

Use of Diagnosis

Eagle Counseling, Consultation, and Research Clinic does not currently offer formal mental health diagnostic services. If indicated in the future, diagnostic impressions may be developed using the Diagnostic and Statistical Manual of Mental Disorders, 5th Edition – Text Revised.

Emergencies

In the event of a mental health emergency or crisis, including suicidal thoughts or plans, you may contact any one of the crisis resources listed below for immediate support.

For individuals in Durham County and surrounding areas:

In-Person Crisis Resources:

- [Carolina Outreach Behavioral Health Urgent Care](#) 919-251-9009 (Durham County)
- [Durham Recovery Response Center](#) 919-510-9132
- [Triangle Springs](#) 919-372-4318 (Raleigh/Durham)
- [Pasadena Villa](#) 877-845-5235 (Raleigh/Charlotte)
- [Wake County Crisis Stabilization Center](#) 984-974-4800
- [Holly Hill Respond](#) 919-250-7000 (Wake County)

For individuals in need of national resources:

Hotlines

- The [Trans Lifeline](#) at 877-565-8860
- [Blackline](#) at 800-604-5841 (prioritizes BIPOC callers)
- The [Samaritans](#) Hotline at 877-870-4673
- The [National Domestic Violence Hotline](#) at 800-799-7233

Confidentiality

Privacy and confidentiality are very important. I am required to keep session notes which become part of your permanent clinical record. This record is confidential and available to you upon request. Everything you say in our sessions is kept confidential, with the following exceptions: 1) you direct me in writing to disclose information to someone else, 2) it is determined you are a danger to yourself or others, 3) you indicate child or elder abuse, or 4) I am ordered by court to disclose information.

Complaints

Although clients are encouraged to discuss any concerns with me, you may file a complaint against me with the organization below should you feel I am in violation of any of these codes of ethics. I abide by the American Counseling Association Code of Ethics (<http://www.counseling.org/Resources/aca-code-of-ethics.pdf>).

North Carolina Board of Licensed Clinical Mental Health Counselors
 P.O. Box 77819
 Greensboro, NC 27417
 Phone: 844-622-3572 or 336-217-6007
 Fax: 336-217-9450
 E-mail: Complaints@ncblcmhc.org

Acceptance of Terms

We agree to these terms and will abide by these guidelines.

Client: _____ Date: _____

Counselor: _____ Date: _____