

# **Michigan Counseling Association**

120 North Washington Square, Suite 110 A ● Lansing, MI 48933 ● 1.800.444.2014

# **COUNSELOR SUPERVISION INFORMATION**

#### **General Information & Disclaimer**

**Sexual Problems** 

Individuals meeting counselor supervision requirements are eligible to be listed on MCA's Web site.

Disclaimer: The MCA provides this list as a service to the profession. MCA neither endorses nor guarantees the credentials of anyone on this list. It is up to the potential supervisee to confirm the supervisor's credential who provides supervision. Please refer to the state law statute for information regarding the law concerning the qualifications of a supervisor.

An annual fee of \$100.00 is charged to individuals posting their information. The fee is *waived for MCA Members* in good standing.

I. Michigan Counseling Association: Membership Status I am a Member				
II. Personal Details				
Title Ms.	Gender F	Education Master	'S	
First Name	Jodi	Last Name	Salamino	
Address	P.O. Box 51			
City State Zip	Lake Ann, MI 49650	County		
Email	jsalamino@yahoo.com			
Phone Number	231.933.5440	Fax Number	231.933.5430	
III. License Information  x LPC LLPC CAC x NCC Other:  IV. Specialty				
X marks all that apply, E = extensive expertise in an issue				
Emotional Concerns x Anger		Stressful Situati Abuse/Neglect	Stressful Situations Abuse/Neglect	
E Anxiety/Fear/Panic		E Addiction/Sul	E Addiction/Substance Abuse	
E Coping Skills			x Anger Management	
E Depression/Bi-Polar x Loss/Grief			Attention Deficit/Hyperactivity x Chronic/Terminal Illness	
·		x Divorce	x Divorce	
Relational Concerns x Blended Families		_	Eating Financial	
x Communication			x Gambling	
x Divorce		Infertility	Infertility	
Family		E Role or Age		
Friends/Other		-	x Sleep Disturbance	
x Parenting x Partner		Victim of Crime		

# Page 2: Salamino, Jodi Specialty - continued X marks all that apply, E = extensive expertise in an issue Other **Academic** Adoption/Foster Care Career/Work **E Coping Skills** x Health **Impulse Control** Obsessive/Compulsive **Sexual Orientation** x Spirituality E Suicide E: Military; Deploymant, reintegration, combat stress, trauma, P.T.S.D., Military Family issues, Law enforcement & corrections, Critical incident stress management, crisis intervention Other: \_ I. **Client Focus** Age Specialization Child x Adolescent E Adult **Elder Elder Client Sexual Orientation** Setting yes Gay, Lesbian, Bisexual, Transgender E Individual

## **E** Group

Couple **Family** 

#### Multicultural Experience

x Extensive Limited None

#### **Client Gender**

x Male x Female **Transgender**  yes Heterosexual

### **Religious Orientation of your Clients**

x Any **Buddhism E** Christian Islam **Jewish** LDS/Mormon None

Other: \_\_\_\_\_

#### I. **Supervision Training**

Received training to satisfy standards of supervision according to the laws in the state of Michigan.

yes