Art Therapy Session Termination Form

Client Name	
The many int Many a	
Therapist Name	
Date	
Reason for Termination	
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Summary of Therapy Process	
Client Achievements / Progress	
Unresolved Issues / Concerns	
Future Recommendations / Referrals	
Client Feedback	
Client Signature	
The new int Circumstance	
Therapist Signature	
Date	