School Counseling Permission Form

My name is Amber and I am the new CDS/Counselor at JMOS. I feel fortunate to be a part of the team supporting your child's learning experience. I am a clinical social worker with training and experience working with children, adolescents and adults. A cornerstone in my approach is the belief that we are all doing the best we can with the resources we have inside and around us. In this interest, it is my hope that I can be both an external support to students as well as guide them in accessing the strengths and resources they already have.

Individual and small group school counseling is offered as part of JMOS's Comprehensive School Counseling and Child Development Program. Counseling sessions are intended to help students build relationship with themselves and others, overcome barriers to success, identify/understand/express feelings, learn problem solving strategies, develop social skills, and identify support systems that can help them at school. <u>Until we can meet in person again,</u> counseling sessions will be held via Zoom.

It is important to note that these are **not** therapy sessions, and are offered on a short-term basis. If it is determined that your child could use additional counseling/support, a referral for community counseling will be made. If you would like more information about community counseling, please let me know, and I can supply that for you.

If you give permission for your child to meet with me one-on-one or in a small group, please fill out this form and return it via email, Canvas, or the front office at Lincoln/John Muir. Feel free to be in communication with me about any questions or concerns you might have.

Sincerely,
Amber Langer, CDS, CSWA
541-482-1611 ext: 1216
Cadie.Langer@ashland.k12.or.us

| Date: | Student's Name: | | |
|--------------------|-----------------------------------|--------------------|---------------------|
| Teacher: | Grade: | Age: | |
| Parent/Guardian C | ontact Info: | | |
| Parent/Guardian N | ame: | | |
| Parent/Guardian Si | gnature: | | |
| Comments (anythi | ng that you would like me to know | about supporting y | your child/family): |
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