



METCALF ELEMENTARY SCHOOL

JENNIFER L. MORALES, PRINCIPAL

CHELSEA ADAMS, ASSISTANT PRINCIPAL

904 Fairbanks Road
MORENCI, AZ 85540
PHONE 928-865-7290
FAX 928-865-7294

Permission Slip for School Counseling

Dear Parent/Guardian,

Your child, _____, has been referred to the Metcalf Elementary School Counseling Program to be seen in either a group or in an individual setting, as well as participating in activities related to counseling with our school counselor, Mrs. Tisha Morgan. In order for services to be provided, your permission is needed.

Individual counseling is available for students who can benefit from extra assistance outside of the classroom. The purpose of this school-based counseling is to help children with concerns that may be interfering with their learning in school. School counseling is designed to be developmental and preventative in nature. It is conducted on a short-term basis. If long-term counseling is required, referral resources will be suggested. Progress from individual school counseling will be shared with the child's teacher and parents as needed, and in general terms.

Please consider whether you give permission for your child to receive this extra assistance and return this permission slip to school as soon as possible. This permission will cover services for the 2017 – 2018 school year. If you have any questions or would like to discuss the services in greater detail, please feel free to contact me at 928-865-7290. Thank you for considering this positive support opportunity for your child.

Sincerely,

Jennifer L. Morales
Principal

Yes, I give permission for my child to participate in counseling services with Mrs. Tisha Morgan at Metcalf Elementary School.

No, I do not give permission for my child to participate in counseling services with Mrs. Tisha Morgan at Metcalf Elementary School.

Student's Name: _____

Parent's Name: _____

Phone Number: _____

Parent Signature: _____ Date: _____