

Bear River High School

Consent Form

The purpose for this disclosure is to allow the counseling center and their staff to administer surveys for all three grades (10th – 12th) during a student's career at Bear River High School with the intent to gather relevant data for the Counseling Comprehensive Guidance Program. This data may include information about the colleges a student has applied for, areas of career interest, the number of scholarships applied for and for and received, planned majors and minors in college, financial aid, plans for the future, etc.

I have read the consents form and recognize that my participation in this study is entirely voluntary and that I am free to withdraw at any time. I understand that any information resulting from this survey will be strictly confidential.

I agree and give permission for my student to participate in these surveys.

_____ Student name

_____ Parent/Guardian Signature

_____ Date

Bear River High School Comprehensive Guidance

letter of permission for counseling sessions

The goal of counseling in a school setting is to provide support and instruction relating to the immediate needs of the student. It is **not** therapy and should **not** be considered as long-term therapy. Sessions are brief and aimed at ensuring the safety of the student. We make every effort to follow the counseling guidelines contained in the American School Counselors Association Code of Ethics. This means we will keep the information shared with us confidential unless you give us permission to share it, or unless we are required by law or school policy to share it. ***State and federal law requires the following information is shared with parents, law enforcement, family services, and other agencies:***

- If we believe the student is at risk of harming themselves or others
- If we believe someone is trying to hurt them
- If a judge orders us to provide information in court
- If a law is broken

These situations are taken very seriously and often we will consult with other professionals to pursue the best course of action.

Parental Consent: Parental consent is specifically required for school counselors to meet with your student regarding **Responsive Services**. This includes:

- Healthy Life Styles
- Relationship Skills
- Coping Skills and Stress Management
- Crisis Response for Mental and Emotional Wellness
- Health Issues
- Referral to other Mental Health Professional

Parental consent is **not** required for academic advisement and planning, post high school planning and preparation, academic assistance, or academic accommodation.

Students may be referred to the counselors by Administrators, Teachers, School Staff, Parents, Peers, Law Enforcement, or themselves. These counseling sessions are confidential. However, we will encourage the student to share information we discuss with their parent/guardian. Please understand that we will need the student's permission to disclose information obtained during our sessions. During the course of our discussion(s) your student may discuss his/her personal views and experiences as appropriate. If you have questions please contact your students counselor at 435-257-2500

Please understand that under the law, your child cannot participate in scheduled Responsive Service meetings or discussions unless and until this letter of permission is signed and returned to BRHS Counseling Center.

I give permission for my child _____ to participate in the anticipated discussion(s) as described above.

Parent / Guardian Signature

* Date

Family Educational Rights & Privacy Act

* Section 53A-13-302 Utah Code, provides that parents must be notified at least two weeks prior to a school activity or planned discussion that may lead a student to reveal private information.