



Parent/Guardian Permission for individual and /or Group Counseling Services and Activities

Washington County School District offers a wide range of support services to students. We would like to offer your student the opportunity to participate in some supportive counseling while at school.

During the course of our discussion(s) students may share their personal views and experiences as appropriate. Meetings with the school counselor will take place at an appropriate time during the school day and will provide time for your child to confidentially discuss feelings about many things, possibly including personal difficulties. Every effort will be made to respect family privacy, and there is no intent to discuss sensitive issues; however, the law requests that we remind you that unexpected subjects**may arise as children express their feelings. You will be notified under the following circumstances:

- 1 – The student reveals information about hurting himself/herself or another person.
- 2 – The student or another person may be in physical danger.

FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT

*Section 53A-13-302, Utah Code, requires a two-week waiting period before beginning counseling services. If you would like to begin these services as soon as possible, please sign below to waive the two-week waiting period.

Parent/Guardian sign your name: _____ Date: _____

PERMISSION AND CONSENT

I, as parent/legal guardian, give consent for my student to participate in the following Counseling Support Services and/or activities (please check the approved activities by checking all appropriate the boxes below):

- ☐ I give my student permission to receive counseling services on an individual level.
- ☐ I give my student permission to participate in counseling activities on a group level.
- ☐ I give my permission for a WCSD Intern to sit in on counseling services on an individual and/or group level.
- ☐ I give WCSD permission to seek Medicaid reimbursement for counseling services.

Student Name (Please Print): _____

Your Name (Please Print): _____

Relationship to the student (Please Print): _____

Your Signature: _____

Date: _____

**Subjects, as written in Utah State Law, may include: politics; emotional or psychological difficulties; income, sexual behavior, orientation or attitudes; illegal, anti-social, demeaning or self-incriminating behavior; critical appraisals of family relationships; religious affiliations or beliefs, and/or legally recognized privileged and analogous relationships.