

**Kimberly Moore, School Counselor  
Shelley Sayles, School Counselor  
Shawn Crump, District Social Worker  
Barbie Scites, Secretary**

### **School Counseling Information and Informed Consent Agreement**

Dear Parent,

Currently our program will be delivering services that focus on the three major components of school counseling as defined by American School Counseling Association. Those three areas of concentration are academic success, social/emotional development, and career development. Our program is constructed to address these three areas with large group activities, volunteer and compensated presenters, and classroom lessons. Your child may also receive individual services on a limited basis.

*Throughout the school year we may contact you regarding your child's academic progress, an immediate need, or anytime that your assistance is needed in meeting the needs of your child. **Our department is not capable of long-term individual services** and should it be determined that your child may need long-term counseling services the appropriate referral would be made and you will be contacted.*

As established by our procedures assigned school counselors are to assist in crisis intervention, provide short term counseling sessions to solve pending issues, assist in student course selection and academic counseling, and are responsible for developing and delivering a counseling curriculum that meets the needs of our students. Counselors are not available to testify in court for personal matters, conduct psychological evaluations, or to provide assessment that may lead to mental or physical diagnosis. In matters where a mental or physical problem may be suspect; an appropriate referral will be made to any or all of the following: school social worker, assigned mental health counselor, or appropriate community agencies and you will be notified.

School counselors/social workers as provided by Kentucky Law are granted privileged communication in many instances. With this in mind we will make contact with parents as necessary to provide for the safety and well being of our students. Privileged communication is not protected in instances when abuse is suspected, there is a potential for harm to self, or a potential to harm others. In these instances, the appropriate agencies will be contacted and parent/guardian notified of the actions taken.

Also, along the lines of confidentiality, is the likelihood of your child discussing personal and private information with their counselor as needed. In instances where the student is a minor the law clearly protects your parental right to know what issue your child is receiving counseling for. We would ask that you allow your child some degree of privacy in confiding in their assigned counselor and ask your permission to only relate to you the overall issues that we may be addressing with your child as opposed to revealing specifics, unless necessary for the safety reasons noted above. This degree of cooperation, we feel, is necessary to allow the student to receive the full benefit of our counseling services.

If you have any questions concerning curriculum, procedures, or policies please feel free to call our department. Your signature on the back page constitutes your agreement to allow your child to participate in our program as described. Thank you for your time and we look forward to working with you and your child.

Sincerely,

Kimberly Moore  
School Counselor

Shelley Sayles  
School Counselor

Shawn Crump, MSW  
District Social Worker

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I have read and understand the description of school counseling/social work program provided at Ashland Middle School. I give my consent for my child to participate in the program.

Printed Name of Student: \_\_\_\_\_

Grade: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_