What can I help you with?

Mrs. Erin Theriot

11th Grade Counselor

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Your Name Today’s Date

What can I help you with?

Check one of the following:

\_\_\_\_ My concern is urgent. I need to see you as soon as possible.

\_\_\_\_ My concern is not urgent. I would like to see you in the next few days.

\_\_\_\_ I will come into guidance during lunch to get information.

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TO BE FILLED IN DURING OUR SESSION

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 Student Signature Counselor Signature Date & Time

Were your questions answered or were you given resources to find the information you are looking for? Yes No

List the key points from our meeting. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Do you have any unresolved issues after this meeting? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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What are some positive experiences you have had as an AHS student? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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\_\_\_\_\_\_\_\_\_\_ **If checked**, Please return this form signed by your parent/guardian.

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 Signature Date