

Counseling Department 2018-19

Student Name: ______Grade:

Dear Parents/Guardians,
In our continuing mission to assist your child and his/her educational needs, the Counseling Department would like you to update any information by answering the questions below as applicable. This confidential information will go directly to your child's counselor and may be essential to his/her educational process. There is no need to return this form if there have not been any changes or new developments that his/her
counselor should be made aware of.
1. a) Please list any changes in your child's <i>physical limitations</i> (visual, auditory, asthmatic, diabetic, etc.) which may need special attention during the school year.
b) What specific needs does your child have as a result of the above (including medications)?
2. a) Has there been any new development in any assessments for <i>learning differences</i> or other conditions (LD, ADD, Autism Spectrum Disorder, etc)? If so, <i>please provide a complete copy of his/her most current educational evaluation</i> , if available, and list any specific academic needs. Are there academic areas that are a significant struggle for him/her? Please explain below.
b) Any new or changes in medication?
3. Has there been any significant <i>emotional stress</i> that your child has recently experienced which you think his/her counselor should be made aware of (separation or divorce, remarriage, death or serious illness of a loved one, problems with bullying or fitting in at school)?

4. Is there any other information you feel we sh	ould know?
☐ I would not like this information release	ed to anyone other than my child's counselor at this time.
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☐ I give my permission for this information	on to be made available to the appropriate teachers.
☐ I would like my shild's sounseler to son	test me for additional information not provided here
i would like my child's counselor to con	tact me for additional information not provided here.
Parent Signature	Date
Email Address	Phone
Thoule you for your operation. We welcome	our contact from you which more halo we hatten most your
child's needs here at Christian Brothers.	any contact from you which may help us better meet your
Sincerely,	
Melissa McClellan, MS, PPS	
Coordinator of Counseling Services	

NOTE: Please return this completed form in a sealed envelope with the counselor's name on it (see below for list of counselors) to the Main Office. The envelope will be forwarded confidentially to that counselor.

Counselor Assignments:

Senior, Class of 2019 – Mr. Kirk Purdy Junior, Class of 2020 – Mr. Armando Diaz Sophomore, Class of 2021 – Mr. John Riley-Portal Freshman, Class of 2022 – Mrs. Blaire Moskat