Dear Parent/Guardian,

At our school we are always looking for ways to better support children's growth and learning.

I will be offering a small group for  $2^{nd}$  grade girls. The group will meet once a week during their classtime for 20-25 minutes for six-eight weeks total. The following topics and skills may be addressed in the group:

- Worries you can and can't control
- How to participate in class
- How to ask for help
- It's okay not to be perfect

I think your child could benefit from small group attention on these skills. If you could please fill out the form below and return it to school, I would really appreciate it. During the course of group meetings information will be sent home on helpful tips and discussion topics.

Thank you for your continuing support of your child's education!

Erika L Zamora School Counselor

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PLEASE READ, CHECK BOX, SIGN AND RETURN THIS PORTION

I CONSENT to have my child \_\_\_\_\_\_ participate in the group.

I would like MORE INFORMATION about this group. PLEASE CALL me at \_\_\_\_\_

I DO NOT give permission for my child to participate.

PARENT GAURDIAN SIGNATURE: \_\_\_\_\_

Date: