

Dear Parents and Guardians:

My name is Dorthea Bovy and I am the K-6th grade school counselor at Jesup Community School. My job is to help *all* students succeed both academically and interpersonally. To do this, I will often work with small groups of students. These groups will take place during lunch, which we call "Lunch Bunch." This is something I have found the students really look forward to and enjoy, as they get to have lunch in my room with 5 other students from their grade! I do my best to make learning fun and utilize therapy games as much as possible.

My vision for our primary students (K-2nd grade), is that *every* student gets to be in a small group. This type of group is not focused on a particular topic, but instead focuses on normal developmental issues for children of that age, reinforcing healthy social-emotional growth. Basically it's guidance in a small group; learning empathy, respect, friendship, and academic skills. Classroom teachers rotate through their class lists, choosing 2 students from their class every week.

Our intermediate students (3rd-4th grade) will focus on specific topics such as school success, friendships, anger control, and self-esteem. ***3rd and 4th grade parents/guardians will have the option to sign up their child for a particular topic during registration or by email, up to six students per topic. All open slots will be based on teacher referral.** New groups and topics are formed and rotated quarterly.

Middle school students (5th-6th grade) will be based on self-referral.

While students are encouraged to share with their parents about group and what they are doing and learning, they agree to keep confidential personal information shared by other students.

For your child **NOT** to be part of one of these small groups, he or she must have this form signed by you.

Thank you for your time. If you have any questions or concerns, please feel free to contact me via email (dbovy@jesup.k12.ia.us) or phone (319-827-1700 ext. 1126).

I **DO NOT** give my consent for (please print first and last name of child(ren))

_____ In grade _____ (K-6th grade)

_____ In grade _____ (K-6th grade)

_____ In grade _____ (K-6th grade)

to participate in small group counseling.

Parent/Guardian Signature

Date