



I, or we, _____, the parent(s)/guardian(s) of
Parent(s)/Guardian(s)

_____ were involved in a conference with
Student

school personnel on ____/____/____.

We have been notified that our child is or may be considering suicide, self-harm or harm to others. We may have been advised that we should seek immediate support and/or consultations for our child outside of school. We have been given community resources and a home safety plan. School personnel have clarified the school's role and will provide follow-up assistance for our child.

We plan to: *(please initial your choice)*

- Take our child home at this time.
- I give permission for _____ to pick up my child.

If necessary, a follow up meeting will be scheduled to discuss additional support for my child. If my child is returning from medical care, I will contact the School Counselor to schedule a reentry conference.

Parent (Legal Guardian)

Date

School Staff Member

Date