

Parental Permission Letter

You may use the letter in its entirety, or you may edit it to fit your needs.

Dear Parents:

I will be conducting a small counseling group for children who have experienced the death of a close family member. During the group sessions, we will discuss feelings we have when we lose someone we love, ways to cope with our loss, and things we can do to feel better. The students will make a memory book with writings and drawings. The group will meet twice a week for three weeks.

If you would like for your child to participate, please sign the form below and return it to my office. If you have any questions, you can reach me at _____.

Sincerely,

School Counselor

I give permission for my child, _____, to participate in small group counseling sessions on grief.

Parent's signature _____

Date _____