



**PARENT / GUARDIAN REQUEST FOR COUNSELLING BY SCHOOL APPOINTED
SOCIAL WORKER**

NAME AND SURNAME OF LEARNER:	
GRADE AND CLASS:	
DATE:	
NAME AND SURNAME OF GUARDIAN 1:	
CONTACT NUMBER OF GUARDIAN 1:	
NAME AND SURNAME OF GUARDIAN 2:	
CONTACT NUMBER OF GUARDIAN 2:	

BRIEF DESCRIPTION OF THE CONCERN REGARDING THE LEARNER:

OR:

I REQUEST THE SOCIAL WORKER TO CONTACT ME TO DISCUSS MY CONCERNS:

CONTACT NUMBER: _____

MOST CONVENIENT TIME TO BE CONTACTED: _____

PLEASE NOTE THE FOLLOWING REGARDING CONFIDENTIALITY:

No information regarding a parent/guardian/learner will be given to anyone outside of the counselling sessions. This includes information regarding the therapeutic process, information disclosed by the learner, as well as other personal information. If a learner is identified by the social worker as a child in need of care and protection as stipulated by the Children's Act 38 of 2005, or the social worker is instructed by an order of court, the social worker must comply with the relevant legal processes.

As far as possible, the social worker:

- Will obtain permission from the parent/guardian to share confidential information, and
- Will only make information available to relevant professionals.

Please e-mail this information to nataleprinsloo@gmail.com or leave at reception in a sealed envelope.

PARENT/GAURDING SIGNATURE

DATE