

## Academic Assistance

- Provided on an individual and small group basis for students
- Assistance completing college applications

## Career Planning

- Assistance with writing resumes
- Assistance with searching for employment

## Support Groups

*Groups offered based on demand.*

*Topics have included:*

- Anger Management
- Anxiety
- Grief and Loss
- Mindfulness and Meditation
- Relationships

## Individual & Family Counseling

- Confidential counseling services to youth and their families
- Referrals to other mental health services are available

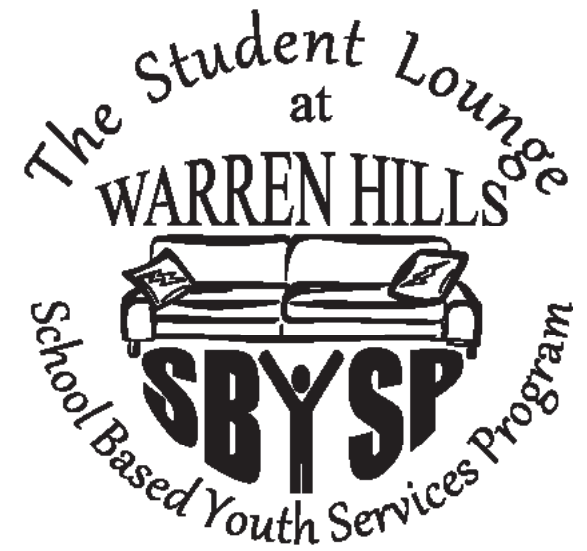
### Our Mission

*The goal of the School Based Youth Services Program at Warren Hills Regional School District is for all students, regardless of academic level or background, to get the most out of the school experience. This includes therapeutic, social and recreational opportunities for youth to build on their own strengths to reach success.*

### School Based Programs and Services Available to Students and Families

#### Include:

- Lunch Time Activities
- After School Activities
- Recreational Trips
- Academic Assistance
- Individual & Family Counseling
- Support Groups
- Career Planning



Warren Hills High School

**41 Jackson Valley Road**

**Washington, NJ 07882**

**(908) 689-3050 ext 3617**

Recreational Services ext. 3646

Counseling Services ext. 3618

The School Based Youth Services Program at Warren Hills is funded through a grant provided by the New Jersey Department of Children and Families, Division of Family and Community Partnerships, administered through the Family Guidance Center of Warren County, in collaboration with the Warren Hills Regional School District.

***SchoolBasedWarrenHills.org***

**Consent Form for  
School Based Youth Services Program (SBYSP)**  
A program of the Family Guidance Center of Warren County

\_\_\_\_\_ give consent for \_\_\_\_\_  
(name of parent or guardian, or student if 16 or older)

\_\_\_\_\_ Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Grade \_\_\_\_  
(name of student)

to participate in services provided by the SBYSP at Warren Hills Regional School District.  
The consent applies to all SBYSP services unless noted below.  
***do not* want my child to participate in the following services:**

\_\_\_\_\_  
(leave blank for no exclusions)

*My family's home address is:*

Street Address \_\_\_\_\_

City, State & Zip Code \_\_\_\_\_

*I can be reached at:*

Cell or Home phone #: \_\_\_\_\_ Guardian's Phone \_\_\_\_\_

If you would like to receive emails regarding upcoming School Based events (up to 6 times per year) enter your email here: \_\_\_\_\_

YES \_\_\_\_\_ NO \_\_\_\_\_ Initial here to grant permission for this student's image (without name) to be published on School Based's website, social media, or press releases; or that of our parent company the Family Guidance Center of Warren County.

YES \_\_\_\_\_ NO \_\_\_\_\_ UNSURE \_\_\_\_\_ Is your student/you eligible for reduced or free lunch.

\*Your response to this question does not impact ability to participate in SB services. This is simply a piece of information required by our funders: Dept. of Children and Families.

In order to ensure program effectiveness, students may be invited to participate in Student Satisfaction Surveys and other assessments that help us better serve students.

I realize that this consent is valid as long as this student is enrolled in the WHRSD, but can be withdrawn by me, in writing, at any time.

\_\_\_\_\_  
Signature of Parent or Guardian/ \*Student's Signature if over 16 Date \_\_\_\_\_

**\*While counseling services provided are confidential, the school is entitled to know where students are for attendance purposes.**