

**AMERICAN UNIVERSITY  
OF ARMENIA**

**COUNSELING SERVICES**

**Procedures**

**Effective August 21, 2018**

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## **VISION STATEMENT**

Counseling Services aims to provide effective counseling to AUA students to foster their personal, emotional, social health and support their academic success. Counseling Services values the national, cultural, gender and individual diversity our students bring to AUA campus.

## **MISSION STATEMENT**

Through the provision of Counseling Services, namely individual and group counseling, periodic workshops, crisis intervention and referral services, Counseling Services provides AUA students with resources to solve problems, overcome possible barriers and find effective solutions to issues impeding their academic, emotional, social, personal wellness and integrity.

## **SERVICES OFFERED**

Individual and group counseling

Workshops

Crisis Intervention and referral services

## **ELIGIBILITY**

All AUA students (degree or non-degree) are eligible to apply for individual and group counseling sessions and attend workshops which are based on short-term, problem-oriented and solution-focused counseling model.

## **COUNSELING CENTER WORKING HOURS**

Counseling Services are open from Monday through Friday from 09:00 a.m. till 05:45 p.m. during the academic year and will function within limited hours during holidays. Open hours for the individual/group counseling are 11:00 a.m. till 04:00 p.m., Students may get appointments outside of the open hours as needed.

## **PAYMENT**

No fee will be charged to students for utilizing Counseling Services on campus.

## **CONFIDENTIALITY**

Confidentiality is of prime importance to Counseling Services, through which we provide the students with a safe and protected environment, an atmosphere of support and empathy where they can share their concerns. All personal information and content of the sessions are not accessible to anyone, thus being strictly confidential. At the first counseling session, students above the age of 18 will be presented with the confidentiality procedures and will sign an informed consent form before the session starts, which signifies that the student is ready to be engaged in the counseling process. The counselor will make all the necessary attempts to ensure that the student fully understands the confidentiality principles along with the exceptions. In the case of students below the age of 18, the informed consent form will be signed by a parent or other guardian. In case a student under 18 years approaches Counseling Services with a sensitive issue such as sexual orientation, pregnancy, drug use, relational issues with parents and does not want their parent(s) or guardian(s) to know about his/her engagement with Counseling Services, then the student may sign the consent form. This measure is taken for providing students with a safe, protective environment to talk.

Though the counseling process is highly confidential, there are a number of exceptional cases which oblige the counselor to report/release the information provided during the counseling without the student's permission to his/her supervisor:

1. If the counselor assumes that the student might be of danger to himself/herself or others, the counselor must release the information without the student's consent. This will allow facilitating better safety both for the student and those potentially involved.
2. If the counselor suspects child abuse (below 18 years old), including sexual abuse, physical abuse and neglect, the counselor may release the information without the student's consent. The counselor is also obliged to report/release the suspected abuse of elderly and vulnerable adults.

The student may review his/her records of the counseling sessions, upon written request, which will become part of his/her counseling records. Yet a student's counseling records and files are not educational records and are accessible only to the counselor and the student. They are not shared with other units within AUA.

Prior to the release of information to a third party, the student must complete an Information Release Form. Counseling information cannot be released to the following without the student's permission: parents or guardians, spouse, siblings, another therapist, GP or any other person/agency.

## **PROFESSIONAL CODE OF ETHICS**

The counselors are expected to be familiar with and adhere to *The Ethical Principles of Psychologists and Code of Conduct* enacted by the American Psychological Association (APA) as well as the American Counseling Association (ACA), applicable laws and regulations of the Republic of Armenia. For more information, please see

[http://www.apa.org/ethics/code2002.html#10\\_01](http://www.apa.org/ethics/code2002.html#10_01) to access the code of ethics of the APA. The code of ethics for the American Counselor Association can be found at

<http://www.counseling.org/knowledge-center/ethics>.

## COUNSELING CENTER'S SCOPE OF SERVICES

### INDIVIDUAL and GROUP COUSELING

Individual counseling provides students the opportunity to present their concern(s) to the counselor during face to face sessions. The student may approach the counselor with concerns/problems the student had either prior coming to AUA or during studies. The range of issues may vary, including but not limited to emotional, personal, interpersonal, behavioral and academic problems, such as depression, anxiety, fear, loneliness, time management, eating concerns, homesickness, low self-esteem, sexual identity, exposure to abuse, domestic violence, personal and family relationships, and others. Individual counseling will provide students with necessary resources to function better in the academic setting, perform better in social networking, and gain a better sense of life-impeding behaviors/situations the student might be experiencing.

Group counseling is offered to address issues such as assertiveness, overcoming shyness, advancing communication skills, personal development and other issues. The groups are normally closed groups, and do not add members as the sessions start. The number of members per group may vary from 4 to 10 members.

In addition, Counseling Services provides consultation to faculty and staff who might have concerns about a student, including academic, behavioral, emotional or personal.

### WORKSHOPS

Within Counseling Services, we provide regular workshops, which are short-term, structured and agenda led. The workshops are open to 20 participants at a time. The workshops are designed in an interactive manner to facilitate active group discussion and provide time for exercises. During the workshops no one will be asked to share any personal information.

### CRISIS INTERVENTION and REFERRAL SERVICES

Crisis intervention is a service offered to students who are in serious or immediate emotional distress, including cases where:

- the student verbally or behaviorally conveys that he/she is in crisis
- the student seems to have lost connection with reality
- the student upsets the university's ordinary operations and/or campus life
- the student is in imminent danger to herself/himself or others
- the student was exposed to attempted rape or rape
- the student was exposed to physical or emotional abuse
- the student identifies himself/herself as being in crisis
- Other extraordinary situations

Students in crisis can visit or call the Counseling Center during regular business hours (**09:00 a.m. till 05:45 p.m.**). During the non-working hours of Counseling Services, academic breaks or holidays the students are advised to contact Center for Student Success (CSS) by **tel: (+374) 060-61-27-56** or visit CSS during regular working hours, or contact **AUA Security by tel: (+374) 060-612-727 or (+374) 060-612-729** or **Public Safety at 911** if there is any emergency.

A student who faces an emergency will meet the counselor during regular working hours. The counselor will meet the student and create a safety plan, including how to manage the crisis and make follow-up appointments with the student to further support him/her and build the necessary resilience skills.

### **SCREENING FOR SUICIDAL CASES /ADMISSION TO HOSPITAL**

If a student has indicated a plan, attempted or has threatened to or has succeeded in inflicting bodily harm to him or herself or others, the Counselor will carry out a suicide evaluation with the student. If it is ascertained that the student is suicidal, the Counselor will discuss hospital admission with the student. If the student declines to go to the hospital, campus security will be called and asked to escort the student to the hospital. Efforts will be made to keep the student apprised of the process.

In keeping with professional ethics codes and legal requirements, maintaining the safety of students and others takes precedence over maintaining the confidentiality of students. In the event of a necessary disclosure of confidential information, only information vital to contributing to safety will be disclosed, and then only to persons in a position to make appropriate use of the information.

After the student is referred to the hospital and psychiatric hospitalization is recommended, the Counselor will notify the families of significantly suicidal or dangerous students so that they can provide support and help in making decisions about the student. The rationale for notifying or not notifying the provost (or designee) and families in these circumstances will be carefully documented in the student's file. The provost (or designee or the Counselor) will contact families of suicidal or dangerous students unless the counselor involved has a previous relationship with the family.

Prior to returning to AUA, the student must obtain a psychological assessment and an on-going treatment plan (provided on recommendation of a doctor) that will allow them to be successful in their academic career. A letter from the Counselor will be sent to the student that outlines this plan. The letter will state that the Counseling Center and the provost (or designee) will review the recommendations and the provost (or designee) will in consultation with the Counselor and doctor make the decision if/when the student is able to return and if so, what assessments and on-going treatment may be required. A letter informing the student of the decision will be sent from the Provost's Office.

If the University becomes aware of the suicide attempt after the act, the Counselor, and if deemed appropriate, the provost (or designee), will interview the student to determine what action, if any, is necessary. The student may be asked to obtain a psychological assessment and on-going treatment plan in order to verify that the student is ready to return to classes.

### **PROTOCOL FOR SUICIDE THREAT**

In the event a student is actively suicidal during a meeting with the counselor (i.e. has expressed hopelessness, a desire to die or kill him or herself, has access to means, has indicated a plan, etc.), the student will not be left alone; further action will be taken.

*If the student has not inflicted bodily harm:*

- 1) Call the provost (or designee) for support.
- 2) Discuss hospitalization with the student.
- 3) If the student will go voluntarily to a hospital, ask him/her to contact someone who can accompany them to the hospital for a psychiatric evaluation.
- 4) The student should be informed that his/her family must be notified.
- 5) During business hours, the counselor should call the emergency psychiatric team ahead of time. The counselor should identify him or herself as an AUA staff member, discuss the admission, and check on bed availability.
- 6) The counselor will contact the provost (or designee) who will contact the student's family to inform them about the student's situation.

*If the student has inflicted bodily harm:*

In which a reasonable person would regard as serious, where the person is believed to have ingested substance(s) the effect of which is uncertain, or where the extent of the injury is unknown and the student is unresponsive to stimuli, the student will not be left alone.

Immediately, AUA security must be contacted at **(+374) 060-612-727 or (+374) 060-612-729.** Security will first call the ambulance, and then contact the nurse **(+374) 060 61 2595)** within nurse's working hours (**9 a.m. till 05:45 p.m.**). The incident will be immediately reported to the Counselor **(+374) 060-612-519)** and the provost **(+374) 060-612-526)**. Upon arrival of the ambulance, the student will be taken immediately to the nearest hospital. The quickest, safest transportation available should be used following the guidelines below:

- 1) Call **103** for ambulance.
- 2) Private transportation (perhaps necessary in limited, emergency situations) should be used as a last resort.

\*The students with suicidal ideation threat may be referred to **Psychiatric Medical Center.**

## **MAKING APPOINTMENTS FOR COUNSELING**

It is advised that the student contact the counselor in person (Main Building, room 418M), by e-mail (counselingservices@aua.am) or phone (**(+374-60) 60 612-519)**. The scheduled appointments are highly recommended to assure the counselor's availability. Yet, the student may also approach the counselor on a walk-in basis and the student will be seen on a first come, first served basis. At the first session, the student will be asked to bring in the completed Intake Form, which they can find either on the Counseling Services website (<http://studentsuccess.aua.am/files/2015/12/Intake-form.pdf>) or pick up from the Counseling Services office (Main Building, 418M). The Intake Form will aid in determining the specific needs of the student, which will be discussed in more details during the session.

The number of sessions for individual counseling is up to 16 sessions, but the number may be extended based on need. The length of individual sessions is about 50 minutes (including session documentation time and preparation for the next one). Group Counseling usually runs from 4 to 6 sessions, 1.5 hours per session. Students may be referred for group counseling either by the counselor or be self-referred.

### **Students under 18**

If the student is under 18, their parent or other guardian will be asked to sign the informed consent form. Still, we will make every effort to discuss the nature of the counseling issues first with the student, and then with their parent or guardian.

During the non-working hours of Counseling Services, academic breaks or holidays the students are advised to contact Center for Student Success (CSS) by tel: (+374) 060-61-27-56 or visit CSS during regular working hours, or contact **AUA Security** by tel: (+374) 060-612-727 or (+374) 060-612-729 or **Public Safety at 911** if there is any emergency.

## **DEVIATIONS FROM THE APPOINTMENTS**

### **Late Arrivals**

The student will be seen if he/she is late for less than 15 minutes. If the student comes later, he/she will be asked to reschedule the appointment.

### **No Shows**

“No show” is when a student misses the appointment without cancelling or rescheduling the appointment. The “No show” appointment will count against the limited number of sessions. If the student fails to show for two consecutive sessions, he/she will be notified of his/her ineligibility to utilize the service during the remainder of the academic semester.

### **Cancellation**

The student may cancel the appointment via-email (**counselingservices@aua.am**) or by phone (**+374) 60-612-519**) 24 hours before the scheduled appointment. This is done to make the service available to other students. If the student makes regular cancelations, he/she may be informed of the service availability on the waiting basis.

## **RETENTION OF STUDENT FILES**

The student’s files will be maintained for a period of 7 years following the last contact with a counselor. At the end of the 7-year period, files will be destroyed. A record of destroyed files will be maintained by the AUA Counseling Center. This record shall include the counselor name, date of last contact, and date file was destroyed.

- a. The student will be asked to fill in the Intake Form, which becomes part of the student’s counseling records.
- b. All counseling services will be documented in student counseling files. “Hard” paper copies of such documentation will be placed in the student files as soon as such documentation is available.
- c. All the files will be kept individually in a locked file cabinet in the Counseling Center, and will be accessible only to the counselor.
- d. Every student will need to read and sign the consent form, which becomes part of the student counseling record files.
- e. All the records of the sessions will become part of the student files, which are documented in the progress note file.

- f. Each of the canceled, missed appointments or cases when the student came late, including the minutes missed must become part of the files, and if there is written correspondences (and emails) between the counselor and the student, they should become part of the files.
- g. Documentation of emergency or other services provided after regular working hours will be completed as soon as practically possible, using the “Progress Note” form.
- h. Documentation of any student’s permission to release confidential information will be made using the Counseling Center’s release form. The original will be kept in the student’s counseling file.
- i. Copies of any correspondence (including e-mail messages) with or about clients will be included in student counseling files.

## **REFERRAL SERVICES**

As the Counseling Service provides services on short-term basis to clients and offers limited services, Counseling Services will utilize referral for all cases beyond the scope of the Counseling Service's activities. The student will be referred to the appropriate individual therapist or agency dealing with that issue. Some of the examples of the referral can be:

1. Students with suicidal ideations, threats
2. Students with psychiatric issues
3. Students who might be in need of long-term treatment
4. Students with drug/alcohol abuse
5. Students who might want to consult with a male counselor/psychologist
6. Any other cases which might be unprecedented and will require specialized care.

The counselor will provide all the necessary information to the student, including names and contact information of the individual counselor or agency.

The fee for the first counseling session of those students who might seek a male counselor will be covered by AUA. All the sessions after the first one, will be covered by the student or his/her family. All the other cases for the referral will be covered by the student or his/her family.

\*The students, with suicidal ideation, threat may be referred to Psychiatric Medical Center

## **TERMINATION OF SERVICES**

Utilizing Counseling Services, particularly individual and group counseling is completely voluntary. In some cases, the counselor may terminate the counseling as it might be more appropriate therapeutically. Other circumstances when the counselor may terminate the counseling may be due to the student's lack of commitment, the counseling is not beneficial to the student, or when the counselor may think the counseling sessions do not address the student's concerns. The termination of the services may occur when

- The student has reached the goals set for the counseling
- The student has left AUA
- The student has taken temporary leave from study
- The student has been referred to another counselor or agency

- The student makes repetitive cancelations (two consecutive cancelations)
- The student misses appointments (two consecutively missed appointments)

In the cases of the last two, the student will be notified on their ineligibility to utilize the Counseling Services during the academic semester.

## **APPENDIXES**

Intake Form, Consent Form, Release of Information Form, Progress Note

# AMERICAN UNIVERSITY OF ARMENIA

## COUNSELING SERVICES

### INFORMED CONSENT FORM

**Counseling** is a confidential process dedicated to addressing students' issues with the goal of supporting them to make better sense of the issues they may be dealing with, find effective solutions, and develop necessary skills that may lead to significant reduction in feelings of distress. While counseling offers a variety of potential benefits, during the counseling you might have an increase in feelings of distress. Though counseling may be beneficial in most cases, there is no guarantee as to the outcomes.

The counseling process is a partnership between you and the counselor to work on areas of dissatisfaction in your life or assist you with life goals. For counseling to be most effective, it is important that you take an active role in the process. This involves keeping scheduled appointments, listening to the counselor, being honest with the counselor and discussing the counseling process with the counselor.

In some cases, one session may be sufficient, however if your situation requires multiple sessions, the first session will include an evaluation of your needs and together with the counselor, you will need to define goals for the upcoming counseling sessions. If you have concerns regarding the "fit" between you and the counselor, please feel free to discuss them openly with the counselor. Each of the sessions typically will last up to 50 minutes and each student is eligible to register for up to 16 sessions, which might be extended based on need.

Counseling Services at the AUA campus are **free of charge** to all matriculated AUA students.

**Confidentiality** is of prime importance to the counseling process. Your interaction with the counselor, including the history of appointments, content of the sessions, progress in the counseling and counseling records are not accessible to anyone, unless you provide a written request.

Though counseling is a confidential process, there are a number of exceptions:

- When the counselor assumes that the student might be of danger to himself/herself or others;
- When the counselor has a reasonable suspicion of child abuse (regarding an individual under the age of 18), including sexual abuse, physical abuse and neglect;
- When the counselor reasonably suspects elderly abuse or abuse of vulnerable adults;
- When a court order, issued by a judge, may require the counselor to release information contained in records and/or require a therapist to testify in a court hearing, and/or
- Where otherwise legally required.

**Referral** to another counselor or agency will take place when the counselor determines that the student's concerns are beyond the services offered at the AUA Counseling Services, or the student's concerns require specialized care. In such cases, the student will be referred to an appropriate off-campus Counseling Center. In the event of off-campus referral, you or your family would be financially responsible for the counseling, the psychiatric services and further treatment.

The second option for the referral is when the student feels that counseling would be more beneficial with a male counselor; we will refer you to an off-campus male counselor. The fee for the first counseling session for those students who might seek a male counselor will be covered by AUA. All the sessions after the first one, will be covered by the student or his/her family.

**Please discuss with the Counselor any questions you might have about the counseling process before signing the informed consent form and starting the counseling process.**

**Please note: Because Counseling Services employee(s) work from 9AM- 5:45PM Monday through Friday, with the office closed during evenings, weekends and over breaks, the counselor cannot guarantee that students will receive an immediate response to emails they send to Counseling Services staff. For these reasons, we advise you to call 911 immediately or go to your nearest hospital rather than emailing your counselor if you are having an emergency or are in a life-threatening situation.**

**PLEASE DO NOT SIGN UNTIL YOU HAVE DISCUSSED THE FORM WITH THE COUNSELOR**

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**I, \_\_\_\_\_, have read and discussed the above information with my counselor. I understand the risks and benefits of counseling, the nature and limits of confidentiality, and what is expected of me as a client of the Counseling Services.**

\_\_\_\_\_  
**Signature of the student**

\_\_\_\_\_  
**Date**

**AMERICAN UNIVERSITY OF ARMENIA**

**COUNSELING SERVICES**

**INFORMATION RELEASE FORM**

I, \_\_\_\_\_, hereby authorize the American University of Armenia  
Counseling Services to disclose information to:

Name(s) : \_\_\_\_\_ Phone #: \_\_\_\_\_

Name or Agency Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(street) (city) (state) (zip)

Regarding: \_\_\_\_\_ Student Phone: \_\_\_\_\_  
(Student printed name)

Student Address: \_\_\_\_\_  
(street) (city) (state) (zip)

DOB: \_\_\_\_\_

The information to be disclosed is: \_\_\_\_\_  
\_\_\_\_\_

The purpose of this disclosure is for: \_\_\_\_\_  
\_\_\_\_\_

This consent is effective on \_\_\_\_\_ and expires on \_\_\_\_\_

I understand that I may withdraw this consent at any time by giving written notice to the  
person/organization making this disclosure.

Student signature \_\_\_\_\_

Counselor Name \_\_\_\_\_ Counselor Signature \_\_\_\_\_

**AMERICAN UNIVERSITY OF ARMENIA**  
**COUNSELING SERVICES**  
**INTAKE FORM**

Today's Date: \_\_\_\_\_

Student's Name: \_\_\_\_\_  
(Student printed name)

**CONTACT INFORMATION (check all that apply):**

Permanent Address: \_\_\_\_\_  
(street) (city) (state) (zip)

Cell Phone #: \_\_\_\_\_  OK to phone  OK to leave message

Home or other Phone #: \_\_\_\_\_  OK to phone  OK to leave message

Preferred E-mail address: \_\_\_\_\_  OK to email regarding your appointment  
(Please be aware that email might not be confidential)

**PREFERRED METHOD OF CONTACT:**

Cell Phone:  Home Phone:  Email:  Other (specify): \_\_\_\_\_

Person to notify in case of emergency: \_\_\_\_\_

Relationship to you: \_\_\_\_\_ Telephone: \_\_\_\_\_

**DEMOGRAPHIC DATA:**

Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

Sexual Orientation:  Heterosexual  Lesbian  Gay  Bi-sexual  Questioning

Other  Prefer not to answer

Religious affiliation: \_\_\_\_\_

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Student Status:  Freshman  Sophomore  Junior  Senior  Graduate

Major: \_\_\_\_\_ Minor (if you have one): \_\_\_\_\_

Nationality: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

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**In order to provide optimal service and support, we need to ask some questions that will help us better understand the issues that you are facing or have been facing.**

Did someone encourage you to come to counseling?  Self  Friend  Instructor  
 Advisor  Provost  Family member  Center for Student Services  Other  
(specify) \_\_\_\_\_

Have you received counseling before?  Yes  No

If yes, please state the issue(s) addressed and the results of the counseling.

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Please describe what is troubling you (academic, social, personal, family):

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Approximately how long has this been of concern?

Day  Week  Month  Several Months  Year  Several Years  Most of Life

What do you hope to achieve through counseling? \_\_\_\_\_

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Have you or anyone else in your family ever been to counseling, or received medical treatment for a mental, emotional, or psychological problem? \_\_\_\_\_

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Have you or anyone in your family been addicted to, or abused, any type of drug, alcohol, gambling, etc.?

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Are you currently taking any medications?

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What level of social/emotional support does your family provide?

None  Minimal  Some  Much

What level of social/emotional support do your friends provide?

None  Minimal  Some  Much

What activities/organizations are you engaged in? \_\_\_\_\_

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**CHECK ANY OF THE FOLLOWING THAT APPLY TO YOU**

1. poor appetite	18. perfectionist	35. depression
2. trouble sleeping	19. loss of weight	36. crying spells
3. low self-esteem	20. decision making problems	37. lacking meaning in life
4. suicidal thoughts	21. lack of energy	38. anxiety
5. stomach trouble	22. feeling inferior	39. nightmares
6. headaches	23. worried	40. impatient
7. sexual identity	24. can't make friends	41. shy
8. heavy caffeine use	25. binge on food	42. discrimination
9. bad home conditions	26. alcohol or drug concerns	43. street drugs
10. guilt feelings	27. can't concentrate	44. unmotivated
11. weight gain	28. dieting	45. body image
12. tobacco use	29. feeling tired	46. emotional swings
13. academic concerns	30. financial concerns	47. panic attack
14. loneliness	31. legal concerns	48. loss/grief/death
15. harassment	32. exposed to psychological violence	49. anger
16. intimate relation concerns	33. exposed to physical violence	50. chronic illness
17. procrastination	34. exposed to sexual violence	51. faith concerns

Other \_\_\_\_\_

**OFFICE USE ONLY**

**Summary of initial visit:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Counselor name and signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**AMERICAN UNIVERSITY OF ARMENIA**  
**COUNSELING SERVICES**  
**PROGRESS NOTE**

**Student's Name:** \_\_\_\_\_

**Session Number:** \_\_\_\_\_ **Session Date:** \_\_\_\_\_

**Did the session take place** \_\_\_\_ **Yes** \_\_\_\_ **No (Comment)** \_\_\_\_\_

**Session Length (minutes):** \_\_\_\_\_ **Time of Appointment:** \_\_\_\_\_

**Was student punctual?** \_\_\_\_ **Yes** \_\_\_\_ **No**      **If late, by how long?** \_\_\_\_\_

**BRIEF SUMMARY OF THE SESSION: ISSUES THE STUDENT CAME WITH**

**ASSESSMENT (The counselor's evaluation of the student's current situation and/or behaviors):**

**RESPONSE (In what way did the student respond to the counselor and/or intervention?):**

**TREATMENT PLAN (Continued sessions? Student's homework assignments? Referral?):**

**COUNSELOR'S OBSERVATIONS:**

**COUNSELOR'S NAME** Yelena Sardaryan **SIGNATURE** \_\_\_\_\_