



Counseling Self-Referral

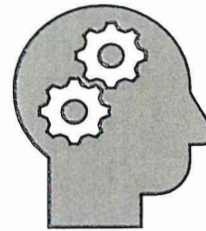
Name: _____

Grade: _____ Date: _____

Homeroom Teacher: _____

I need to see the counselor:

- As soon as Possible!
- Sooner rather than later.
- When there is an opening.



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