

USE SCHOOL LETTERHEAD

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

Dear \_\_\_\_\_:

We are writing to invite you to be part of the Student Assistance process at Seton LaSalle High School because some of your child's teachers have concerns about academic performance and/or behavior. Our experience shows that students do better when parents are involved.

The Student Assistance Team is composed of the Student Assistance Program Coordinator, teachers, guidance counselor(s), and administrators. Our goal is to assist students who may be experiencing difficulties that interfere with their academic success. The team gathers information in order to help students succeed in school. All information gathered is confidential.

Enclosed is the SAP permission form that requires your signature in order for your child to become involved with the Student Assistance Team. Once this form is signed and returned, any information gathered on your child will be presented to the SAP Team for review and is confidential. We will contact you after we have gathered and reviewed this information and invite you to be part of the solution-building process.

We would also like your help in gathering information. We would appreciate your input on the parent survey included in this letter. As the primary influence in your child's life, we would like to know if there are any concerns, strengths, or family issues that you feel influence your child's behavior, or changes in behavior you may have noticed. It would be very helpful if you would take the time to fill out this survey and then return it with the permission form.

Please sign and return the permission form(s) and survey in the enclosed envelope. If you have any questions, please call \_\_\_\_\_, SAP Coordinator at \_\_\_\_\_.

Sincerely,

Your Own Name, Case Manager  
Seton LaSalle Student Assistance Team