

**Dingman-Delaware Middle School**

1365 Route 739, Dingmans Ferry, PA 18328-9730

Phone: 570-296-3140 \* FAX: 570-296-3170

Dear Parents/Guardians,

Your son/daughter has been invited to participate in our support group program at the Dingman-Delaware Middle School. Support groups are beneficial for the students to learn about themselves and each other. We hope to help students express and deal with feelings that they may be experiencing. We believe this will help students better understand themselves and learn ways to deal with their emotions.

Students are not required to participate. Group membership is strictly voluntary. There will be approximately 8 students participating in each group. The group will meet once a week for one class period. The number of weeks vary depending on the group. Students are expected to make up work that is missed in their regular class. Regular attendance is important and will be expected. Students who miss group will not only undermine their own progress, but that of other group members as well. We believe this group will be beneficial to students.

We look forward to your son/daughter participating in Group. Please sign and return the attached permission slip so that your student can participate in the group. If you have any questions please contact the counseling department at 570-296-3152.

Sincerely,

DDMS Counseling Department

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I give permission for my son /daughter to participate in a support group at the Dingman-Delaware Middle School.

Student Name \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_