



## **Small Group Mentorship Program From Outside Source**

### **Parent/Guardian Consent (Opt In) Form**

Dear Parents or Guardians,

As part of our ongoing efforts to provide enriching opportunities for our students, we are excited to announce the launch of a small group mentorship program at our school. This program aims to provide personalized guidance and support to students through mentorship sessions led by experienced professionals in various fields.

We believe that mentorship plays a crucial role in a student's personal and academic development, and we are thrilled to offer this program to our students. The mentorship sessions will cover a wide range of topics including career exploration, academic guidance, personal development, and more.

Before we proceed with this program, we kindly ask for your consent for your child to participate. Your consent will allow us to include your child in the program and ensure they receive the full benefits of this valuable opportunity.

If you would like to give consent for your child to participate in the small group mentorship program, please fill out the attached consent form and return it to us at your earliest convenience. If you have any questions or concerns regarding the program or the consent process, please do not hesitate to reach out to us.

For more information about the mentorship program and details about those individuals providing the mentorship, please contact your school counselor or school social worker.

Thank you for your ongoing support in our efforts to provide the best possible educational experience for your child. We look forward to your participation in this exciting new initiative.

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**I GIVE CONSENT FOR MY CHILD TO PARTICIPATE IN A SMALL GROUP MENTORSHIP PROGRAM  
WITH A MENTOR OR MENTOR GROUP.**

Student name: \_\_\_\_\_ Classroom Teacher: \_\_\_\_\_

School Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_

Parent Guardian Name: \_\_\_\_\_

Parent or Guardian Signature: \_\_\_\_\_

