



We help angry kids, frustrated parents, and distant couples...  
...and just about everyone else.

### SCHOOL COLLABORATION CONSENT

As the parent/guardian of \_\_\_\_\_, I give permission for We  
Climb Counseling & Consulting LLC. to collaborate with my child's school for the purpose of  
arranging in-school sessions (in a private space to honor client confidentiality), and classroom  
observation as needed. My child attends \_\_\_\_\_ School.

Grade: \_\_\_\_\_

Homeroom Teacher: \_\_\_\_\_

Client/ Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness Signature: Avery Rosser Date: \_\_\_\_\_

Client Name: \_\_\_\_\_ CID#: \_\_\_\_\_



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