**Shadow Ridge Middle School**

**Group Counseling**

**2018-19**

The Counseling Department at Shadow Ridge Middle School is committed to helping students build skills that promote healthy self-concepts and good citizenship. Working with students in a group is a wonderful opportunity to build these skills.

Listed below are groups that the counselors will be organizing for the Fall Semester, 2018:

**Stress Management Group** - This group will be open to anyone interested in learning how to reduce and manage stress. Students will participate in games and activities that allow them to get to know their peers and learn that stress in inevitable but manageable. This is a six week group that will meet during advisory period.

**“Guy Talk”** – In this friendship group, we’ll work together to find ways to build friendships and to improve the ones we have! In this group, we will connect with other guys through games and activities that build self -confidence, self esteem and learn vocabulary for expressing emotions. Group will be ongoing either through advisory period or lunch beginning in October.

**“G.I.R.L.S” –** The purpose of G.I.R.L.S. is to help girls discuss and deal with issues and situations that they often face during their teenage years. This group will give girls the opportunity to gain self-awareness, develop positive coping mechanisms, improve daily problem-solving skills, feel connected with other girls, and make healthy decisions. Most importantly, the girls will have FUN! Group will be ongoing through either advisory period or lunch beginning in October.

Janet Ward, Counselor A-K

Elizabeth Wade, Counselor L-Z

972-350-1522

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**Please note**: Groups need at least five members to “make” in order to offer the most comfortable and optimal learning atmosphere. **Once we see who is interested in joining a group, we will look at student schedules to see the best possible time to meet either Advisory or during lunch.**

Please write your child’s name and group of interest below. Please have your child return this form to the **front office** or feel free to email your child’s name so that we may include them in a group: [wardj@lisd.net](mailto:wardj@lisd.net) or [wadee@lisd.net](file:///\\mhsz3\dwm%20Office\wadee\ShadowRidge\wadee@lisd.net). Forms should be returned to the SRMS counselors **as soon as possible.**

Student Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_

Group: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_