

BUILDING BRIDGES



PARENT FACT SHEET FOR BUILDING BRIDGES SPRING 2012

- WHO:** Children grades K-12
- WHAT:** Building Bridges – a program for grieving children and their families
- WHEN:** 6 Tuesday Nights – January 31st to March 6th
- WHERE:** First United Methodist Church
37 E. Beauregard, San Angelo, Texas
- TIME:** 7:00 PM – 8:00 PM
- SPONSORED BY:** Hospice of San Angelo, Inc.
There is no fee charged

The purpose of the Building Bridges program is to provide a unique support group for children who have experienced loss through the death of someone significant in their lives. During this program, children in grades K-12 will be given the opportunity to (1) recognize and express their feelings, (2) build self-esteem through validation, (3) receive guidance as they adapt to the changes in their families, and (4) develop skills in dealing with loss that they may utilize throughout life.

Running concurrently with each children's session is an adult group created uniquely for parents and caregivers. This group is designed to help parents and caregivers have a better understanding of the changes going on with their children.

Referrals to this program may be made through school counselors, ministers, or by simply calling the Hospice of San Angelo office at (325) 658-6524.

THE PARENT CONSENT FORM SHOULD BE SIGNED AND RETURNED TO THE HOSPICE OFFICE PRIOR TO JANUARY 24th FOR THE SPRING 2012 SESSION.

There are a limited number of spaces available, so we recommend you sign up as soon as possible.

Please keep this parent fact sheet for your future reference. Thank you!

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CONSENT FORM FOR BUILDING BRIDGES

Hospice of San Angelo offers a program designed to address the special needs of children who have lost, through death, someone important in their lives. This program consists of six one-hour sessions. Children will be given the opportunity to recognize and express their feelings and receive guidance as they are adjusting to the changes in their lives and in their families. Building Bridges is a grief support group, not professional therapy. The sessions are conducted by trained Building Bridges Volunteers.

It is my desire that my child _____
participate in the Building Bridges Program offered by Hospice of San Angelo, Inc.

Name of Parent/Guardian _____

Address _____ Zip _____

Phone (home) _____ (work) _____ (cell) _____

School _____ Grade _____

Child's Date of Birth _____ Referred by _____

Relationship of Deceased to child _____ Date of Death _____

*Please indicate your child's ethnicity (optional):

____ American Indian ____ Asian ____ Black ____ Hispanic ____ Hawaiian or Pacific Islander
____ White ____ Other

**This information is requested solely for the purpose of seeking eligibility for grants and other funding sources.*

At the close of the six sessions, a brief evaluation will be sent to the referring party and the school counselor. In the interest of the child, I give permission to discuss our situation with a professional counselor. I understand that there will be an Adult Group meeting at the same time, and that it may benefit our family for me to attend.

Signature of Parent/Guardian

Date

Please return this signed consent form to: Building Bridges
P.O. Box 471
San Angelo, TX 76902