

## Alabama School Counseling Program Information and Signature Page

School's Name: \_\_\_\_\_

School's Address and Phone Number: \_\_\_\_\_

Principal's Name: \_\_\_\_\_

Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Principal's Email Address: \_\_\_\_\_

Superintendent's Name: \_\_\_\_\_

Superintendent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Superintendent's Email Address: \_\_\_\_\_

School Counselor's Name: \_\_\_\_\_

School Counselor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

School Counselor's Email Address: \_\_\_\_\_

School Counselor's Name: \_\_\_\_\_

School Counselor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

School Counselor's Email Address: \_\_\_\_\_

School Counselor's Name: \_\_\_\_\_

School Counselor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

School Counselor's Email Address: \_\_\_\_\_

School Counselor's Name: \_\_\_\_\_

School Counselor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

School Counselor's Email Address: \_\_\_\_\_

School Counselor's Name: \_\_\_\_\_

School Counselor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

School Counselor's Email Address: \_\_\_\_\_

Counseling Coordinator's Name: \_\_\_\_\_

Counseling Coordinator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Counseling Coordinator's Email Address: \_\_\_\_\_