

Small Group Counseling Title/Theme: Self Awareness

Grade Level(s): 3-5

Small Group Counseling Description: This group will help students with strategies that can be used to help them maintain or improve their self awareness.

Number of Sessions in Group: 6 sessions plus optional follow-up session

Session Titles/Materials: (Note: *Handouts* and *Student Activity Pages* are included with each session)

Session # 1: How are you feeling?

Materials needed:

[Small Group Counseling Guidelines](#)

Manila folders for each participant

Pencils

Crayons

[Who's Who?](#)

[Feeling Faces](#)

[Cup of Feelings Game](#)

[Empty The Cup Situations List](#)

[Cup of Feelings Sheet](#) (prior to session cut faces into separate, small squares)

[Teacher/Parent/Guardian Small Group Session Follow-up](#)

Session # 2: I'm a Winner: Looking at strengths

Materials needed:

[Small Group Counseling Guidelines](#) (from Session #1)

[Blue Ribbon Book](#) (Pages 1-3)

Pencils

Crayons

Scissors

Stapler

[Teacher/Parent/Guardian Small Group Session Follow-up](#)

Session# 3: Making Your Goals

Materials needed:

[Small Group Counseling Guidelines](#) (from Session #1)

Soccer Ball

Pencil

Crayons

Scissors

Stapler

[Weekly Goal Card Book](#)

[Goal Passbook Folder](#)

[Teacher/Parent/Guardian Small Group Session Follow-up](#)

Session # 4: Problem Solving: Conflict Resolution

Materials needed:

[Small Group Counseling Guidelines](#) (from Session #1)

[Be a STAR](#) poster

[Star Name Tag Patterns](#)

[Role Play Cards](#)

[Problem-Solving Flow Chart](#)

Pencils

[Teacher/Parent/Guardian Small Group Session Follow-up](#)

Session # 5: I was So Mad: Anger Management

Materials needed:

[Small Group Counseling Guidelines](#) (from Session #1)

Scissors

Stapler

Pencils

Crayons

Markers

[Body Outline](#)

[Anger Booklet](#) (Pages 1 & 2)

Chart paper (or black board if available)

[Teacher/Parent/Guardian Small Group Session Follow-up](#)

Unit Assessments

[Teacher Pre-Post-Group Individual Student Behavior Rating Form](#)

[Teacher Feedback Form: Overall Effectiveness of Group](#)

[Request for Feedback from Parents/Guardians](#) (Cover Letter)

[Parent/Guardian Feedback Form: Overall Effectiveness of Group](#)

Session # 6: Review and Wrap-Up

Materials needed:

[Small Group Counseling Guidelines](#) (from Session #1)

Pencil

[Teacher/Parent/Guardian Small Group Session Follow-up](#)

[Certificate of Group Completion](#)

[Student Feedback Form: Overall Effectiveness of Group](#)

Optional Follow-up Session (to be held 4-6 weeks after last group session)

Materials Needed:

8 ½ x 11 paper for each participant

Crayons/markers/pencils

Alternative Procedure: Complete the [Follow-Up Feedback Form for Students](#) (attached to Optional Follow-up Session Plan). Discuss after completing.

Missouri Comprehensive Guidance Standards:

PS.1 Understanding Self as an Individual and as a Member of Diverse Local and Global Communities

PS.2 Interacting With Others in Ways That Respect Individual and Group Differences

Missouri Comprehensive Guidance Concept(s):

PS.1.A. Self Concept

PS.1.B. Balancing life roles

PS.2.B. Respect for self and others

American School Counselor Association National Standard (ASCA):

Personal/Social Development

A: Students will acquire the knowledge, attitude, and interpersonal skills to help them understand and respect self and others.

B: Students will make decisions, set goals, and take necessary action to achieve goals.

NOTE: The overall purpose of the MCGP small group counseling units and sessions is to give extra support to students who need help meeting specific Comprehensive Guidance Program Grade Level Expectations (GLEs). This small group counseling unit provides a "shell" that allows you to personalize sessions to meet the unique needs of your students. Your knowledge of the developmental levels, background knowledge and experiences of your students determines the depth and level of personal exploration required to make the sessions beneficial for your students.

Show-Me Standards: Performance Goals (check one or more that apply)

X	Goal 1: gather, analyze and apply information and ideas
X	Goal 2: communicate effectively within and beyond the classroom
X	Goal 3: recognize and solve problems
X	Goal 4: make decisions and act as responsible members of society

Outcome Assessment (acceptable evidence):

Summative assessment relates to the performance outcome for goals, objectives and (GLE) concepts. Assessment can be survey, whip around, etc.

Students will take a survey during the final session that covers what they learned and how they feel about the group experience. They will also be given their folder with all their activities to take as a reminder of what they have done.

Perceptual Data Collection:

The following end-of-group perceptual data collection forms will be used as a part of Sessions 4 & 5; the forms are attached to the Unit Plan:

Classroom Teacher Assessment:

- The classroom teacher will complete the [Teacher Pre-Post-Group Individual Student Behavior Rating Form](#) for each student before the group starts and after the group ends. Counselor may consider making two copies of this form, one for the pre-assessment and one for the post-assessment, then entering all data on a final form for comparison.
- [Teacher Feedback Form: Overall Effectiveness of Group](#) (teacher completes at the end of the group).

Parent/Guardian Assessment:

- [Parent/Guardian Feedback Form: Overall Effectiveness of Group](#) (sent home with students in Session 4; parents/guardians complete and return form with students the following week.)

Student Assessment:

- [Student Feedback Form: Overall Effectiveness of Group](#) (students complete during Session 5)

Results Based Data Collection:

The counselor will demonstrate the effectiveness of the unit via pre and post comparisons of such factors as attendance, grades, discipline reports and other information, utilizing the PRoBE Model (Partnerships in Results Based Evaluation). For more information about PRoBE, contact the Guidance and Placement section at the Missouri Department of Elementary and Secondary Education.

Follow Up Ideas & Activities

Implemented by counselor, administrators, teachers, parents, community partnerships

After each session, the PSC will provide classroom teacher(s) and parents/guardians a written summary of the skills learned during the session. The summary will include suggestions for classroom and/or home reinforcement of the skills.

Note to Professional School Counselor: *The classroom teacher will complete Part 1 of this form before students begin their small group sessions. The teacher will complete Part 2 of this form after the group ends. This process will provide the school counselor with follow up feedback about individual students who participated in the group.*

**SMALL GROUP COUNSELING
 TEACHER PRE-POST-GROUP PERCEPTIONS
 Individual Student Behavior Rating Form
 (Adapted from Columbia Public Schools' Student Behavior Rating Form)**

STUDENT _____ GRADE _____ TEACHER _____

DATE: Pre-Group Assessment _____ Date: Post-Group Assessment _____

Part 1 - Please indicate rating of pre-group areas of concern in the left hand column.

Part 2 - Please indicate rating of post-group areas of concern in the right hand column.

Pre-Group Concerns Rank on a scale of 5→1 (5 = HIGH→1 = LOW)	Student Work Habits/Personal Goals Observed <i>Colleagues, will you please help us evaluate the counseling group in which this student participated. Your opinion is extremely important as we strive to continuously improve our effectiveness with ALL students!</i>	Post-Group Concerns Rank on a scale of 5→1 (5 = HIGH→1 = LOW)
	Academic Development	
	Follows directions	
	Listens attentively	
	Stays on task	
	Compliance with teacher requests	
	Follows rules	
	Manages personal & school property (e.g., organized)	
	Works neatly and carefully	
	Participates in discussion and activities	
	Completes and returns homework	
	Personal and Social Development	
	Cooperates with others	
	Shows respect for others	
	Allows others to work undisturbed	
	Accepts responsibility for own mis-behavior (e.g., provoking fights, bullying, fighting, defiant, anger, stealing)	
	Emotional Issues (e.g., perfectionism, anxiety, anger, depression, suicide, aggression, withdrawn, low self-esteem)	
	Career Development	
	Awareness of the World of Work	
	Self-Appraisal	
	Decision Making	
	Goal Setting	
	Add Other Concerns:	

Note to Professional School Counselor: This form measures the teacher's perceptions of the overall effectiveness of the group. Teachers complete after Session 5.

**SMALL GROUP COUNSELING
 TEACHER POST-GROUP PERCEPTIONS:**

TEACHER FEEDBACK FORM: OVERALL EFFECTIVENESS OF GROUP

One or more of your students participated in a small counseling group about _____. We are seeking your opinion about the effectiveness of the group e.g., students' relationship with the professional school counselor and other participants in the group and your observations of students' behavioral/skill changes (positive OR negative). We appreciate your willingness to help us meet the needs of ALL students effectively. The survey is anonymous unless you want us to contact you.

Teacher's Name (optional): _____ Date: _____

Professional School Counselor's Name: _____

Small Group Title: _____

Before the group started, I hoped students would learn:

While students were participating in the group, I noticed these changes in their behavior/attitude

Using a scale of 5 to 1 (5 being the highest and 1 the lowest), please circle your opinion about the following

What do you think?	5=High				1=Low
	5	4	3	2	1
Overall, I would rate my students' experience in the counseling group as:	5	4	3	2	1
Students enjoyed working with other students in the group.	5	4	3	2	1
Students enjoyed working with the counselor in the group.	5	4	3	2	1
Students learned new skills and are using the skills in school	5	4	3	2	1
I would recommend the group experience for other students.	5	4	3	2	1
Additional Comments for Counselor:					

Note to Professional School Counselor: Send this COVER LETTER and the Parent/Guardian Feedback Form home with students after Session 4.

SCHOOL LETTERHEAD
Comprehensive Guidance Program

Request for Feedback from Parents/Guardians

Small Group Counseling topic/title: _____

Student's Name _____ Teacher's Name _____

Date: _____

Dear Parent/Guardian,

I have enjoyed getting to know your child in our small group counseling sessions. Next week will be the last session for our group. During the group sessions, we shared information related to a variety of topics. Below is a list of topics discussed during the group sessions.

Session 1: _____

Session 2: _____

Session 3: _____

Session 4: _____

Session 5: _____

Comments about your child's progress:

Attached is a feedback form. I would appreciate input from you about your child's experience in the small group. Please complete the attached **Parent/Guardian Feedback Form** and send the completed form back to school with your child by _____.

Thank you for your support and feedback. Please contact me if you have questions or concerns.

Sincerely,

Professional School Counselor

Note to Professional School Counselor: Send cover letter and this Parent/Guardian Feedback Form home with students after Session 4.

SMALL GROUP COUNSELING PARENT/GUARDIAN POST-GROUP PERCEPTIONS

Parent/Guardian Feedback Form: Overall Effectiveness of Group

Your child participated in a small counseling group about _____. Was this group experience helpful for your child? Following is a survey about changes (positive OR negative) your child made at home while participating in the group at school and since the group ended. The survey will help us meet the needs of ALL students more effectively. The survey is anonymous unless you want the school counselor to contact you. We appreciate your willingness to help us

Professional School Counselor: _____

Date: _____

Small Group Title: _____

Before the group started, I hoped my child would learn _____

I've noticed these changes in my child's behavior and/or attitude as a result of participating in the group:

Using a scale of 5 to 1 (5 being the highest and 1 the lowest), please circle your opinion about the following

What do you think?	5=High	4	3	2	1=Low
Overall, I would rate my child's experience in the counseling group as:	5	4	3	2	1
My child enjoyed working with the other students in the group	5	4	3	2	1
My child enjoyed working with the counselor in the group.	5	4	3	2	1
My child learned new skills and is using the skills in and out of school	5	4	3	2	1
I would recommend the group experience to other parents/guardians whose children might benefit from the small group.	5	4	3	2	1

Additional Comments:

Note to Professional School Counselor: *The Student Feedback Form measures the student's perceptions of the overall effectiveness of the group using the same questions as teachers' and parents answer on their feedback forms. Students complete during the last session. This form is most appropriate for use at the upper elementary, middle school or high school levels.*

**SMALL GROUP COUNSELING
 STUDENT POST-GROUP PERCEPTIONS:**

STUDENT FEEDBACK FORM: OVERALL EFFECTIVENESS OF GROUP

We want your opinion about the effectiveness of your group. We appreciate your willingness to help us make our work helpful to all students. The survey is anonymous unless you want us to contact you.

My Name (optional): _____ Date: _____

Professional School Counselor's Name: _____

Small Group Title: _____

Before the group started, I wanted to learn _____

Because of the group, I have noticed these changes in my thoughts, feelings, actions:

Using a scale of 5 to 1 (5 being the highest and 1 the lowest), please circle your opinion about the following

What do you think?	5=High					1=Low				
	5	4	3	2	1	5	4	3	2	1
Overall, I would rate my experience in the counseling group as:	5	4	3	2	1					
I enjoyed working with other students in the group	5	4	3	2	1					
I enjoyed working with the counselor in the group.	5	4	3	2	1					
I learned new skills and am using the skills in school	5	4	3	2	1					
If other students ask me if they should participate in a similar group, I would recommend that they "give-it-a-try"	5	4	3	2	1					

Additional Comments for the Counselor:

Note to Professional School Counselor: This form measures the student's perceptions of the overall effectiveness of the group using the same questions as teachers' and parents answer on their feedback forms. Students complete during the last session. **This form is most appropriate for use at the K-2 and 3-5 levels.**

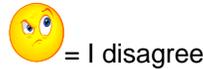
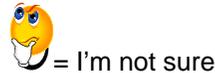
SMALL GROUP COUNSELING POST-GROUP FOLLOW UP WITH STUDENTS
Level: Elementary
Student Feedback Form

Directions: Please complete the Student Feedback Form after completion of the unit.

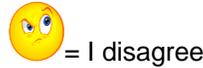
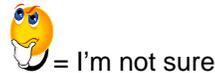
Name: _____ (optional) Date: _____

When I started the group, I wanted to learn _____ about
(the topic of the group).

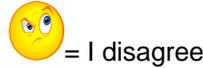
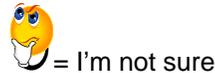
Instructions: Read each sentence. Put a circle around the face that shows how you think and feel right now about what you learned in the group.



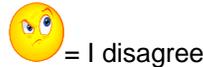
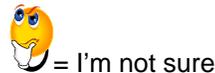
1. Overall, I enjoyed working in the group:



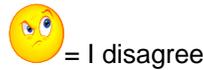
2. I enjoyed working with other students in the group



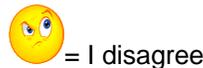
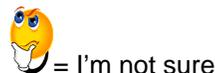
3. I enjoyed working with the counselor in the group.



4. I learned new skills and am using the skills in school.



5. If other students ask me if they should participate in a similar group, I would recommend that they "give-it-a-try"



Additional comments you would like to share with the school counselor:

POST-SMALL GROUP FOLLOW-UP WITH STUDENTS

(OPTIONAL SESSION scheduled 4-6 weeks after group ends)

Level: Elementary/Middle School/High School

Note to Professional School Counselor: *The Follow-up Session Feedback Form for Students may be used in several ways, e.g., as an alternative "Procedure" for the post-group follow-up session, as a discussion guide, or (if post-group follow-up session is NOT scheduled) as a guide for interviewing individual students 4-6 weeks after the group ends. Adapt as appropriate for developmental level of students.*

FOLLOW-UP SESSION FEEDBACK FORM FOR STUDENTS

Name: _____ (optional) Date: _____

Questions:

1. What specific skills are you practicing now that the group is over?
2. What was the most useful thing you learned from the group?
3. What could you use more practice on?
4. How are things different for you now?
5. What Progress have you made toward the goals you set for yourself at the end of our group meetings?
6. How are you keeping yourself accountable?
7. What suggestions do you have for future groups?
8. Circle your overall experience in the group on a scale from 1 → 5 _____

1=Most positive activity in which I have participated for a long time
2=Gave me a lot of direction with my needs
3=I learned a lot about myself and am ready to make definite changes
4=I did not get as much as I had hoped out of the group
5=The group was a waste of my time
9. What specific "things" contributed to the ranking you gave your experience in the group?
10. What would have made it better?

Additional comments you would like to share with the school counselor:

Group Title: Self Awareness

Session Title: How are you feeling? **Session #** 1 of 6

Grade Level: 3-5 **Estimated time:** 30 min.

Small Group Counseling Session Purpose: Students in this group will learn how to identify their feelings by showing how they currently feel.

Missouri Comprehensive Guidance Standards:

PS.1 Understanding Self as an Individual and as a Member of Diverse Local and Global Communities
PS.2 Interacting With Others in Ways That Respect Individual and Group Differences

Missouri Comprehensive Guidance Concept(s):

PS.1.A. Self Concept
PS.1.B. Balancing life roles
PS.2.B. Respect for self and others

American School Counselor Association National Standard (ASCA):

Personal/Social Development
A. Students will acquire the knowledge, attitudes and interpersonal skills to help them understand and respect self and others.

Session #1 Materials (include activity sheets and/ or supporting resources)

[Small Group Counseling Guidelines](#)

Manila folders for each participant

Pencils

Crayons

[Who's Who?](#)

[Feeling Faces](#)

[Cup of Feelings Game](#)

[Empty The Cup Situations List](#)

[Cup of Feelings Sheet](#) (prior to session cut faces into separate, small squares)

[Teacher/Parent/Guardian Small Group Session Follow-up](#)

Session #1 Assessment

At the end of the session each participant will:

- Have a manila folder with their name on it to keep their supplies in until the end of the group
- Know each person in the group's name
- Will have answered the question, "I think being in this group will be....."
- Will be able to describe the four basic feelings of happy, sad, mad, and scared.

Session #1 Preparation

Essential Questions: How do people develop a positive view of themselves?

Engagement (Hook): [Who's Who?](#) ice-breaker at the beginning.

Session #1 Procedures

Session #1 Professional School Counselor Procedures:	Session #1 Student Involvement:
<ol style="list-style-type: none"> 1. Welcome students and have them find a seat. Provide each student with a pencil and a manila folder. Ask them to put their name on the folder and tell them that this folder will be kept until the final group session to hold all their supplies and worksheets. 2. Hand out Who's Who? sheet and give students about 5 minutes to move around the room and find out who will fit in each box and learn other people's names. 3. Following the group introduction and/or "Hook," welcome students to the group. Discuss the Small Group Counseling Guidelines (attached) with the group. Emphasize confidentiality and when YOU (as the counselor) might have to break confidentiality. Add any guidelines the students want to add. See poster example of Small Group Counseling Guidelines. Display the poster to reference during each group session. 4. Hand out Feeling Faces sheet to each participant and discuss the faces. 5. Explain the Cup of Feelings Game and distribute the Cup of Feelings pieces to the players. 6. Closure/Summary: Have each participant share one feeling with the group and then have each answer "I think being in this group will be" <p>NOTE: All materials (Feeling Faces and Who's Who? sheets) are put in the participants manila folder and filed until next group meeting.</p> <ol style="list-style-type: none"> 7. Group assignment: Have students watch people's faces through out the week and see if they can tell how a person is feeling. 8. Distribute & Explain Teacher/Parent/Guardian Session Follow-Up Suggestions. Send a copy home with each student and 	<ol style="list-style-type: none"> 1. Each student will receive a manila folder that they will write their name on and that will be used to keep all their materials until the last group meeting. 2. Students will take Who's Who? sheet and fill all the boxes by talking with the group members and having them write their name in the appropriate box. 3. Students review the guidelines by telling what each one looks and sounds like. 4. Participants will look at and discuss the Feeling Faces sheet. 5. Participants will play the Cup of Feelings Game. They will receive their Cup of Feelings pieces and follow the directions. 6. Closure/Summary: Each participant will hold up one face and talk about when they feel that way. They will then answer "I think being in this group will be" 7. Group assignment: To watch people's faces through out the week and see if they can tell how a person is feeling. 8. Students commit to giving their parents/guardians the Session Follow-up handout.

Session #1 Professional School Counselor Procedures:	Session #1 Student Involvement:
provide a copy to classroom teacher(s) of students in group.	

Session #1 Follow-Up Activities

[Teacher/Parent/Guardian Small Group Session Follow-up](#)

Session #1 Counselor reflection notes (completed after the session)

STUDENT LEARNING: How will students' lives improve as a result of what happened during this session?

SELF EVALUATION: How did I do?

IMPLEMENTATION PROCEDURES: How did the session work?

ALL SESSIONS: POSTER

SMALL GROUP COUNSELING GUIDELINES

- 1. All participants observe confidentiality.**
 - a. Counselor**
 - b. Student**

- 2. One person speaks at a time.**

- 3. Everyone has an opportunity to participate and share.**

- 4. No PUT DOWNS allowed.**

- 5. All participants treat each other with respect.**

- 6. Group members have the opportunity to develop other guidelines.**

SESSION 1

Who's Who?

Someone with brown eyes	Someone who likes pizza	Someone who likes the color purple	Someone wearing tennis shoes
Someone wearing blue	Someone who likes chocolate	Someone who likes cartoons	Someone who can jump rope

Who's Who?

Someone with brown eyes	Someone who likes pizza	Someone who likes the color purple	Someone wearing tennis shoes
Someone wearing blue	Someone who likes chocolate	Someone who likes cartoons	Someone who can jump rope

SESSION 1

Feeling Faces



Embarrassed



Happy



Scared



Mad



Confused



Lonely



Shocked



Furious



Sad



Disappointed



Excited



Mischievous



Hurt



Anxious



Disgusted



Guilty



Interested



Jealous



Proud



Innocent



Optimistic



Bashful



Frightened



Determined



Puzzled

SESSION 1

Cup of Feelings Game

Purpose: To learn about new feelings

Materials needed: [Cup of Feelings](#) sheet (prior to session cut faces into separate, small squares), paper or plastic cup, [Empty The Cup Situations List](#)

Object: To get rid of your feeling cards the fastest by matching them with the appropriate situation.

Procedures:

1. Every participant gets a feeling sheet and the group leader reviews each feeling to make sure the students know what they mean.
2. Group is divided into two teams.
3. Each player gets three feeling cards.
4. Group leader reads a situation from the situation list to the team.
5. Each member of the team can hold up a feeling card if they have a feeling that they think would be appropriate for the situation.
6. Each player with a card explains their reason for that feeling being appropriate. If the feeling is appropriate then the player lays their card on the discard pile.
7. When a play gets rid of all their cards they get a treat or a point for their team.
8. To keep playing you can have team members pull more cards from the cup until it is empty or the time runs out.
9. At the end tally up the team points to see which team wins.

Follow-up:

Discuss the following with the students:

- What made it difficult to decide what feeling was being portrayed in the situation?
- What made it easy to decide which feeling was being portrayed?
- What new feeling words did you learn?
- How did it feel to be on the winning (losing) team?

SESSION 1

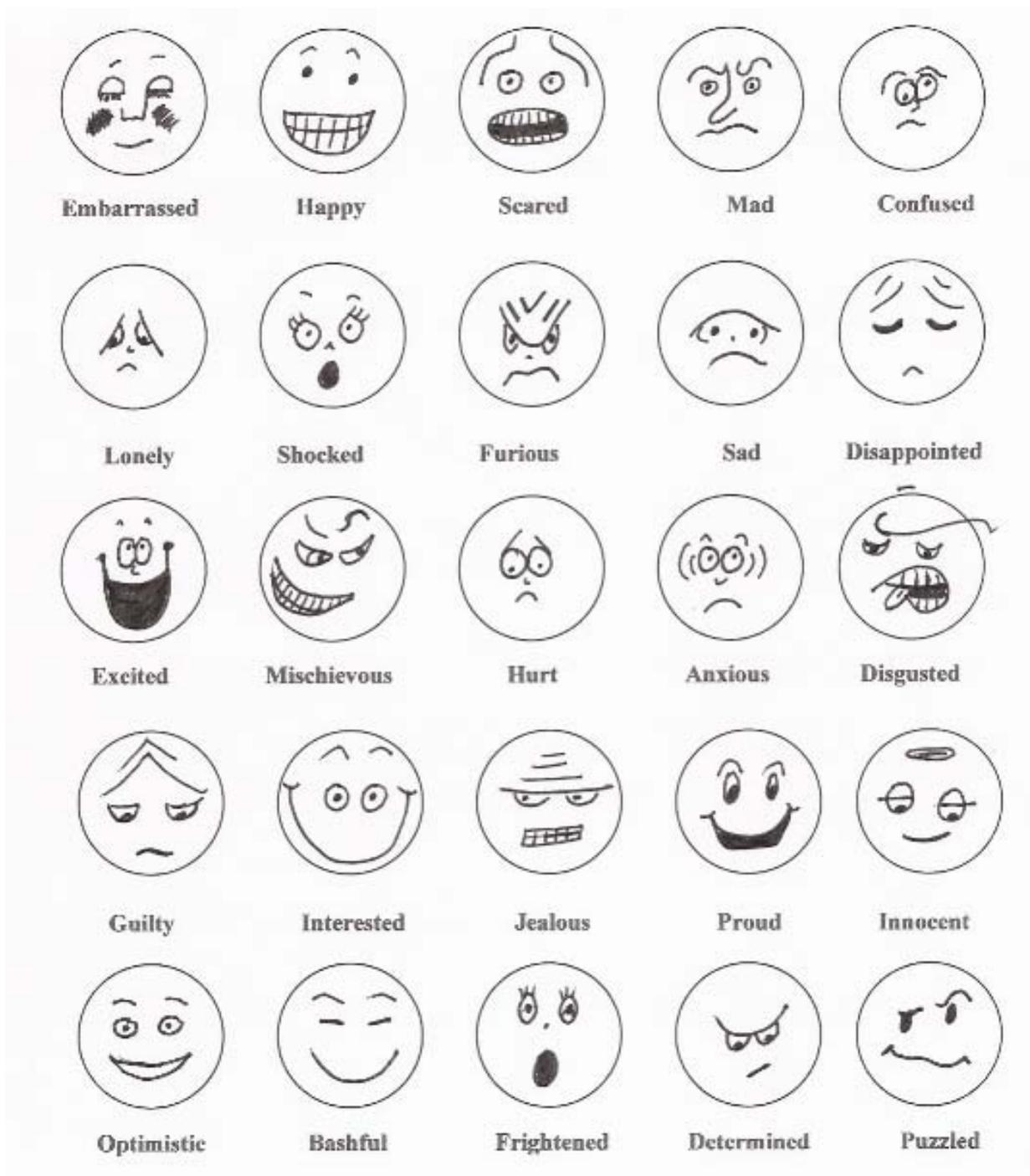
Empty The Cup Situations List

How would you feel if.....?

- You had a birthday party
- Your dog died
- You won a trip to Disney World
- You got an A on a paper
- You got sent to the principal because you were in trouble
- Your mom/dad lost their job
- You saw a glimmer under a rock at the bus stop
- You found a dollar laying on the ground
- You had a ball game and a birthday party and still had to do your homework that night
- Your shirt got torn on the way to school
- Your math class went on for two hours
- You had a science project due tomorrow and you hadn't started it yet
- You had to talk to the entire school in an assembly
- You had to explain a project to the 3rd and 4th graders
- Your best friend moved away
- Someone stole your new pencil
- You stayed up too late last night
- Your grandmother was in the hospital
- You had a nightmare
- You went to camp and were introducing yourself to new people
- You ate cookies and milk
- Your best friend won't speak to you
- Your best friend told a secret that you told them
- You were having a sleep-over
- You were taking a big test
- You heard a noise late at night in your house
- You were staying with your younger brother/sister at night waiting for your mom to get home
- Your mom was having surgery
- You were in a car wreck
- Someone laughed at your new hair cut
- Someone laughed at your joke

SESSION 1

Cup of Feelings Sheet
(prior to session cut faces into separate, small squares)



Handout to be used in each session

Teacher/Parent/Guardian Small Group Session Follow-up

The Professional School Counselor has the option of sending this form to teachers/parents/guardians after each group session to keep these individuals informed of student's progress in the group. Students may complete this form during the session.

GROUP TOPIC: _____ **Session #** _____

Student's Name: _____ **Date:** _____

Today I met with my school counselor and other group members.

Session Goal: _____

Today we talked about the following information during our group:

Circle one or more items.

Friendship	Study Skills	Attendance
Feelings	Behavior	School Performance
Family	Peer Relationships	Other _____

Group Assignment:

I will complete or practice the following at school and/home before our next session.

Our next group meeting will be:

Date: _____ Time: _____

Additional Comments:

Please contact _____, Professional School Counselor at

_____ if you have further questions or concerns.

Group Title: Self Awareness

Session Title: I'm a Winner – Looking at Strengths

Session # 2 of 6

Grade Level: 3-5

Estimated time: 30 min.

Small Group Counseling Session Purpose: This group will help students with strategies that can be used to help them maintain or improve their self awareness.

Missouri Comprehensive Guidance Standards:

PS.1 Understanding Self as an Individual and as a Member of Diverse Local and Global Communities

PS.2 Interacting With Others in Ways That Respect Individual and Group Differences

Missouri Comprehensive Guidance Concept(s):

PS.1.A. Self Concept

PS.1.B. Balancing life roles

PS.2 B. Respect for self and others

American School Counselor Association National Standard (ASCA):

Personal/Social Development

A: Students will acquire the knowledge, attitude, and interpersonal skills to help them understand and respect self and others.

Session #2 Materials (include activity sheets and/ or supporting resources)

[Small Group Guidelines](#) (from Session #1)

[Blue Ribbon Book](#) (Pages 1-3)

Pencils

Crayons

Scissors

Stapler

[Teacher/Parent/Guardian Small Group Session Follow-up](#)

Session #2 Assessment

At the end of the session each participant will have a completed [Blue Ribbon Book](#) that contains pictures (or writing) of their perceived strengths.

Session #2 Preparation

Essential Questions: What gives people strength of character?

Engagement (Hook): [Blue Ribbon Books](#)

Session #2 Procedures

Session #2 Professional School Counselor Procedures:

Session #2 Student Involvement:

1. Welcome students to the group and hand out their folders from last time.

1. Students receive their folders from last session.

Session #2 Professional School Counselor Procedures:	Session #2 Student Involvement:
<p>2. Review Small Group Guidelines and group assignment from previous session.</p> <p>3. Hand out a Blue Ribbon Book (Pages 1-3) to each participant and go through each page.</p> <p>4. Ask participants to fill in the various pages of their Blue Ribbon Book (Pages 1-3) with their strengths.</p> <p>5. Have the participants share their responses before the end of the session. (Students can be discussing their strengths and what things they would like to be better at while they are writing in their books.)</p> <p>6. Closure/Summary: Have the students talk about skills or behaviors that they would like to improve and what changes are needed to make these weaknesses into strengths.</p> <p>7. Group assignment: Practice using their strengths throughout the week and try at least one suggestion on turning a weakness into a strength.</p> <p>8. Distribute & Explain Teacher/Parent/Guardian Session Follow-Up Suggestions. Send a copy home with each student and provide a copy to classroom teacher(s) of students in group.</p>	<p>2. Students listen while school counselor reads the Small Group Guidelines and ask questions/make comments about guidelines. Share individual successes and challenges while completing group assignment throughout the past week.</p> <p>3. Students write their names on their Blue Ribbon Books (Pages 1-3) and go through them page by page to see what they will write or draw on them.</p> <p>4. Students can write and/or draw their responses to the questions on the Blue Ribbon Book (Pages 1-3).</p> <p>5. Participants share their responses.</p> <p>6. Closure/Summary: Students discuss how to take weaknesses and turn them into strengths.</p> <p>7. Group assignment: Practice using their strengths throughout the week and try at least one suggestion on turning a weakness into a strength.</p> <p>8. Students commit to giving their parents/guardians the Session Follow-up handout.</p>

Session #2 Follow-Up Activities

[Teacher/Parent/Guardian Small Group Session Follow-up](#)

Session #2 Counselor reflection notes (completed after the session)

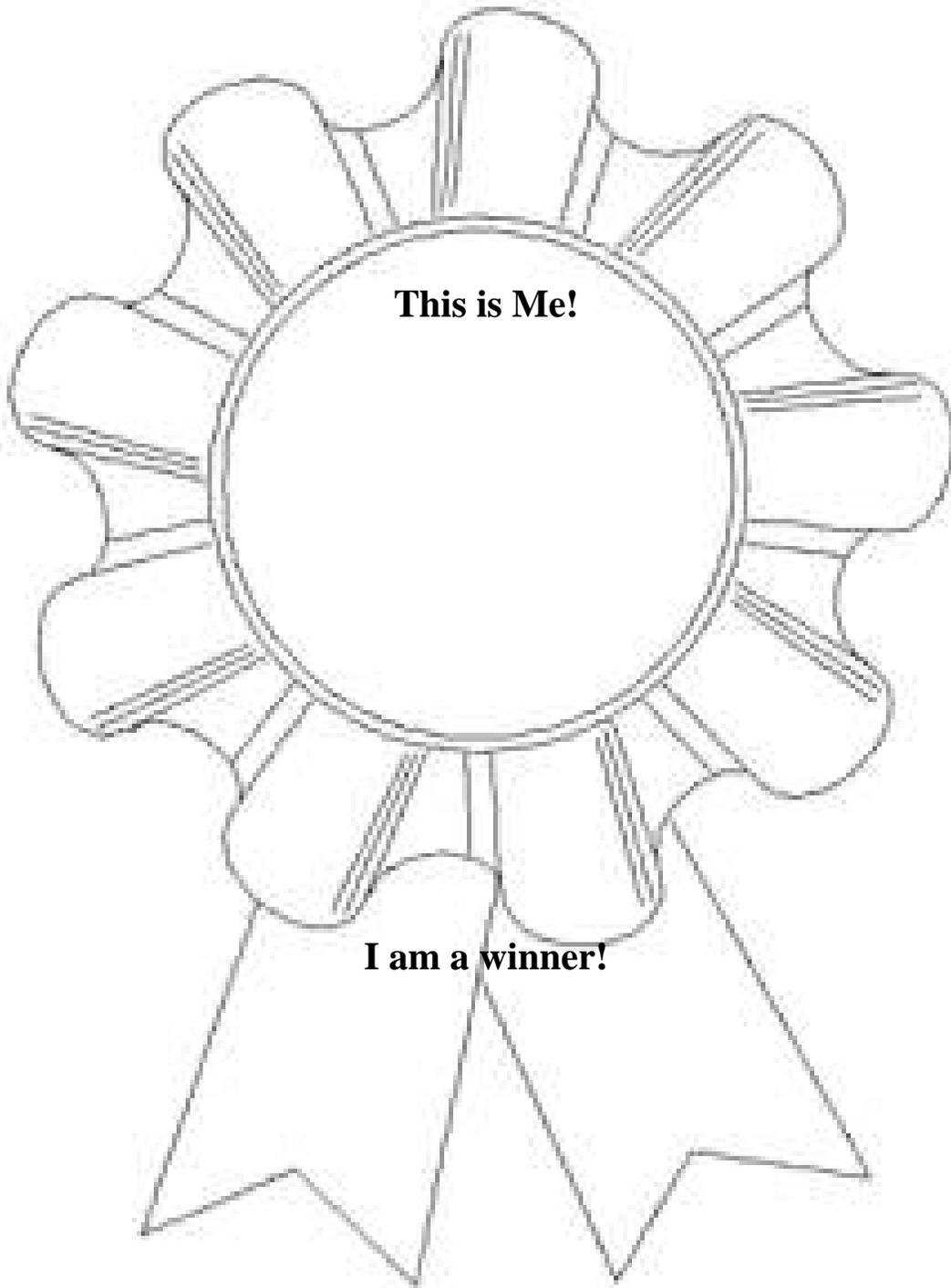
STUDENT LEARNING: How will students' lives improve as a result of what happened during this session?

SELF EVALUATION: How did I do?

IMPLEMENTATION PROCEDURES: How did the session work?

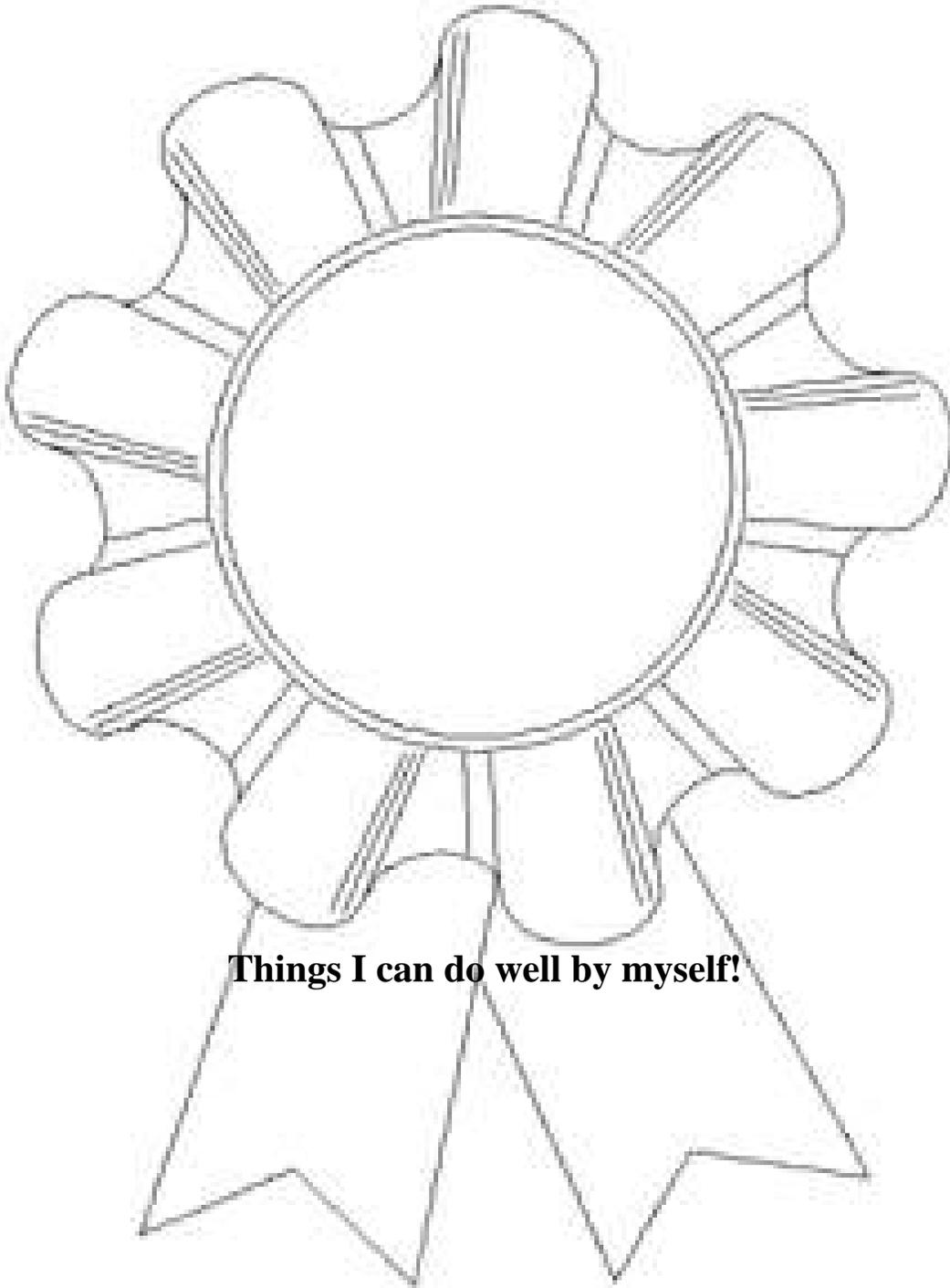
SESSION 2

Blue Ribbon Book (Page 1)



SESSION 2

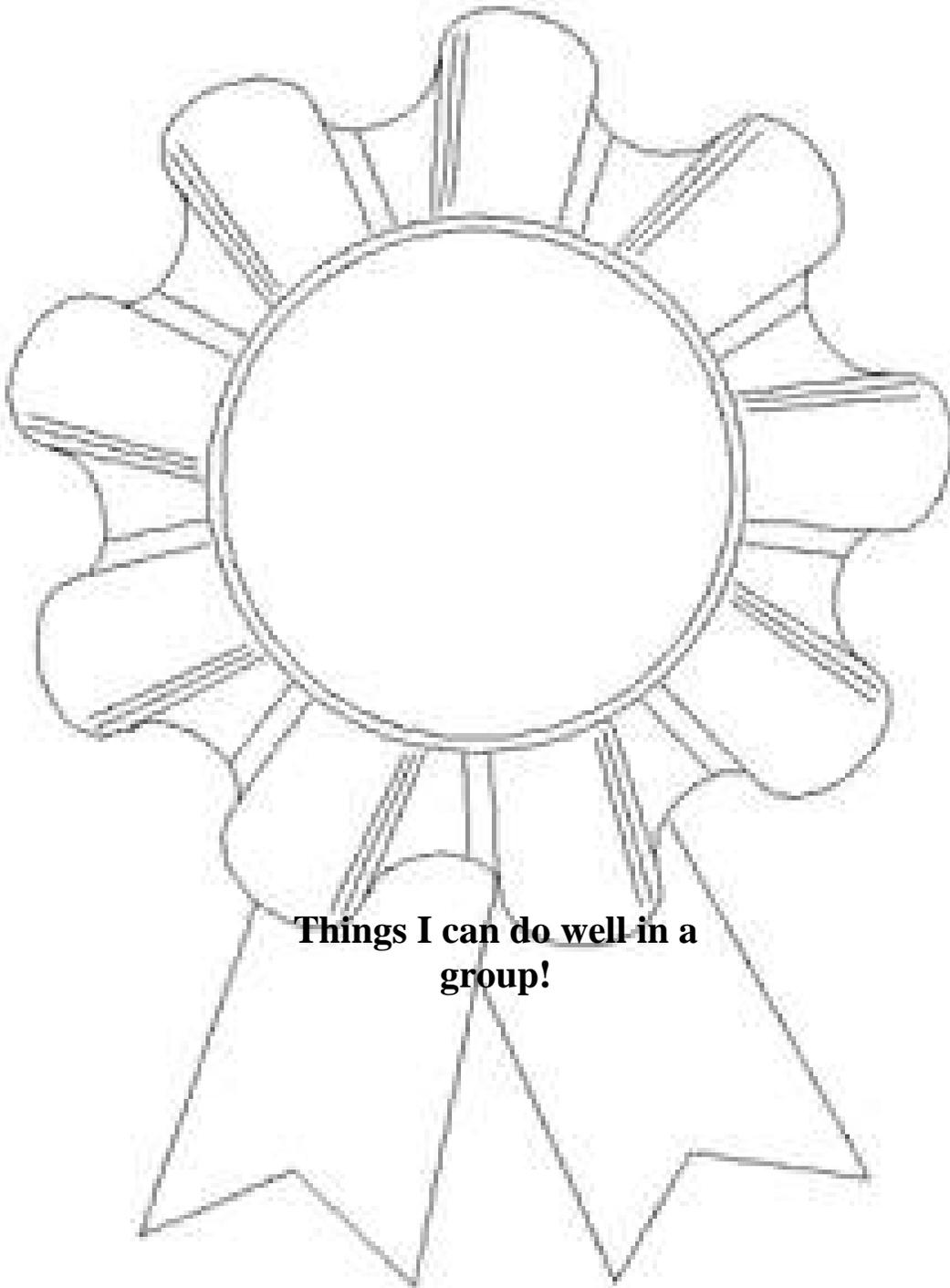
Blue Ribbon Book (Page 2)



Things I can do well by myself!

SESSION 2

Blue Ribbon Book (Page 3)



**Things I can do well in a
group!**

Handout to be used in each session

Teacher/Parent/Guardian Small Group Session Follow-up

The Professional School Counselor has the option of sending this form to teachers/parents/guardians after each group session to keep these individuals informed of student's progress in the group. Students may complete this form during the session.

GROUP TOPIC: _____ **Session #** _____

Student's Name: _____ **Date:** _____

Today I met with my school counselor and other group members.

Session Goal: _____

**Today we talked about the following information during our group:
Circle one or more items.**

Friendship	Study Skills	Attendance
Feelings	Behavior	School Performance
Family	Peer Relationships	Other _____

Group Assignment:

I will complete or practice the following at school and/home before our next session.

Our next group meeting will be:

Date: _____ Time: _____

Additional Comments:

Please contact _____, Professional School Counselor at
_____ if you have further questions or concerns.

Group Title: Self Awareness

Session Title: Making Your Goals

Session # 3 of 6

Grade Level: 3-5

Estimated time: 30 min.

Small Group Counseling Session Purpose: This group will help students with strategies that can be used to help them maintain or improve their self awareness.

Missouri Comprehensive Guidance Standards:

PS.1 Understanding Self as an Individual and as a Member of Diverse Local and Global Communities

PS.2 Interacting With Others in Ways That Respect Individual and Group Differences

Missouri Comprehensive Guidance Concept(s):

PS.1.A. Self Concept

PS.1.B. Balancing life roles

PS.2 B. Respect for self and others

American School Counselor Association National Standard (ASCA):

Personal/Social Development

A: Students will acquire the knowledge, attitude, and interpersonal skills to help them understand and respect self and others.

B: Students will make decisions, set goals, and take necessary action to achieve goals.

Session #3 Materials (include activity sheets and/ or supporting resources)

[Small Group Counseling Guidelines](#) (from Session #1)

Soccer Ball

Pencil

Crayons

Scissors

Stapler

[Weekly Goal Card Book](#)

[Goal Passbook Folder](#)

[Teacher/Parent/Guardian Small Group Session Follow-up](#)

Session #3 Assessment

At the end of the session each student will have written strategies for setting goals.

Session #3 Preparation

Essential Questions: What are goals and why are they important?

Engagement (Hook): A soccer ball.

Session #3 Procedures

Session #3 Professional School Counselor Procedures:

1. Welcome students to the group and hand out their folders from last time.

Session #3 Student Involvement:

1. Students receive their folders from last session.

Session #3 Professional School Counselor Procedures:	Session #3 Student Involvement:
<p>2. Review Small Group Guidelines and group assignment from previous session.</p> <p>3. Hold up the soccer ball and ask how many of the students like soccer and know anything about the sport.</p> <p>4. Let the group know that they are going to be working on goal setting and hand out the Weekly Goal Card Book and Goal Passbook Folder.</p> <p>5. Have students cut the Goal Passbook Folder out and make their mini folders. Fold on the dotted lines.</p> <p>6. Have participants look at the goal setting steps and discuss them.</p> <p>7. Have participants list on the inside of the folder some short and long term goals that they might have.</p> <p>8. Closure/Summary: Have participants think of one short term goal that they want to set and they then fill out the goal sheet outlining what they are going to work on. Have the students draw a picture of what they will look like when they accomplish their goals.</p> <p>9. Group assignment: Ask the participants to work on their short term goal. They will use the weekly progress form to monitor their goal. They need to be prepared to come back and talk about what they have accomplished.</p> <p>10. Distribute & Explain Teacher/Parent/Guardian Session Follow-Up Suggestions. Send a copy home with each student and provide a copy to classroom teacher(s) of students in group.</p>	<p>2. Students listen while school counselor reads the Small Group Guidelines and ask questions/make comments about guidelines. Share individual successes and challenges while completing group assignment throughout the past week.</p> <p>3. Students discuss playing soccer (it takes a team, working together, making goals, etc.).</p> <p>4. Each participant receives the Weekly Goal Card Book and Goal Passbook Folder.</p> <p>5. Students cut the Goal Passbook Folder out and create their mini folders. Fold on the dotted lines.</p> <p>6. Participants look over the goal setting steps and discuss them.</p> <p>7. Participants list some short and long term goals that they have inside their mini folder.</p> <p>8. Closure/Summary: Participants think of one short-term goal that they want to set and they then fill out the goal sheet outlining what they are going to work on.</p> <p>9. Group assignment: Participants work on their short term goal and prepare to come back and talk about what they have accomplished.</p> <p>10. Students commit to giving their parents/guardians the Session Follow-up handout.</p>

Session #3 Follow-Up Activities

[Teacher/Parent/Guardian Small Group Session Follow-up](#)

Session #3 Counselor reflection notes (completed after the session)

STUDENT LEARNING: How will students' lives improve as a result of what happened during this session?

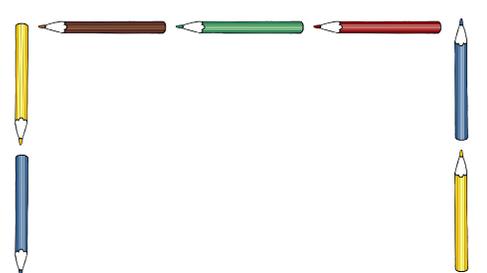
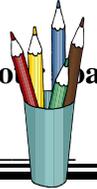
SELF EVALUATION: How did I do?

IMPLEMENTATION PROCEDURES: How did the session work?

SESSION 3

Weekly Goal Card Book
 (Copy and cut these apart)

Goal: I want ... _____ _____ _____ Steps: I will ... _____ _____ _____ Resources: I need _____ _____ _____ Evaluation: Did I?.... _____ _____ Signed: _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="padding: 5px;">Weekly Progress</th> <th style="padding: 5px;">Made It!</th> <th style="padding: 5px;">Almost!</th> <th style="padding: 5px;">Missed</th> </tr> </thead> <tbody> <tr> <td style="text-align: center; padding: 5px;">Monday</td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center; padding: 5px;">Tuesday</td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center; padding: 5px;">Wednesday</td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center; padding: 5px;">Thursday</td> <td></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center; padding: 5px;">Friday</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Weekly Progress	Made It!	Almost!	Missed	Monday				Tuesday				Wednesday				Thursday				Friday			
Weekly Progress	Made It!	Almost!	Missed																						
Monday																									
Tuesday																									
Wednesday																									
Thursday																									
Friday																									

<p style="text-align: center;">Goal-setting Steps</p> <p>1. GOAL: What is your goal? (Be specific)</p> <p>2. STEPS: When will you start your goal? What will you do to reach your goal? When will you make your goal? How will you know you reached your goal?</p> <p>3. RESOURCES: Who and/or what do you need to help you make your goal?</p> <p>4. EVALUATE: Did you hit your target? <i>Yes:</i> Congratulate yourself! Thank those who helped you. Set a new goal. <i>No:</i> Why not? What will you do differently next time?</p> <p>5. REMEMBER: Try it! Stop and picture yourself making it. Praise yourself when on target. Keep track of your successes. Keep trying! Persevere!</p>	<p style="text-align: center;">Weekly Goal Card</p> <div style="text-align: center;">  </div> <p style="text-align: center;">Draw a picture of you making your goal.</p> <p>Name: _____</p> <div style="text-align: center;">  </div>
--	---

SESSION 3

Goal Passbook Folder – *(Copy and give to each participant)*



Handout to be used in each session

Teacher/Parent/Guardian Small Group Session Follow-up

The Professional School Counselor has the option of sending this form to teachers/parents/guardians after each group session to keep these individuals informed of student's progress in the group. Students may complete this form during the session.

GROUP TOPIC: _____ **Session #** _____

Student's Name: _____ **Date:** _____

Today I met with my school counselor and other group members.

Session Goal: _____

**Today we talked about the following information during our group:
Circle one or more items.**

Friendship	Study Skills	Attendance
Feelings	Behavior	School Performance
Family	Peer Relationships	Other _____

Group Assignment:

I will complete or practice the following at school and/home before our next session.

Our next group meeting will be:

Date: _____ Time: _____

Additional Comments:

Please contact _____, Professional School Counselor at _____ if you have further questions or concerns.

Group Title: Self Awareness

Session Title: Problem Solving: Conflict Resolution **Session #** 4 of 6

Grade Level: 3-5

Estimated time: 30 min.

Small Group Counseling Session Purpose: This group will help students with strategies that can be used to help them maintain or improve their self awareness.

Missouri Comprehensive Guidance Standards:

PS.1 Understanding Self as an Individual and as a Member of Diverse Local and Global Communities
 PS.2 Interacting With Others in Ways That Respect Individual and Group Differences

Missouri Comprehensive Guidance Concept(s):

PS.1.A. Self Concept
 PS.1.B. Balancing life roles
 PS.2 B. Respect for self and others

American School Counselor Association National Standard (ASCA):

Personal/Social Development

A: Students will acquire the knowledge, attitude, and interpersonal skills to help them understand and respect self and others.

Session #4 Materials (include activity sheets and/ or supporting resources)

[Small Group Counseling Guidelines](#) (from Session #1)

[Be a STAR](#) poster

[Star Name Tag Patterns](#)

[Role Play Cards](#)

[Problem-Solving Flow Chart](#)

Pencils

[Teacher/Parent/Guardian Small Group Session Follow-up](#)

Session #4 Assessment

Each person will successfully act out a role play activity and give at least one example of how to appropriately solve a problem.

Session #4 Preparation

Essential Questions: How can we appropriately solve our problems so that everyone wins?

Engagement (Hook): Students enter and find their star name tag.

Session #4 Procedures

Session #4 Professional School Counselor Procedures:

1. Have star name tags for each participant waiting at their seat.

Session #4 Student Involvement:

1. Participants find the star name-tag with their name at their seat.

Session #4 Professional School Counselor Procedures:	Session #4 Student Involvement:
<p>2. Review Small Group Guidelines and Group Assignment from previous session.</p> <p>3. Hand out the Be a STAR poster and Problem-Solving Flow Chart to discuss ways to solve problems and conflict.</p> <p>4. Hand out Role Playing Cards to each student (and helps those who need it to read their card.) This can be done in pairs or threes if helpful.</p> <p>5. Have small groups/individuals act out their role-play and give one or two ways to handle the problem. Ask the big group for other suggestions.</p> <p>6. Closure/Summary: Review ways for people to handle problems and/or conflicts appropriately in school and have students give suggestions. NOTE: All materials are put in the participants manila folder and filed until next group meeting.</p> <p>7. Group assignment: Have participants try one or two of the suggested strategies throughout the week until the next session.</p> <p>8. Distribute & Explain Teacher/Parent/Guardian Session Follow-Up Suggestions. Send a copy home with each student and provide a copy to classroom teacher(s) of students in group.</p>	<p>2. Students listen while school counselor reads the Small Group Guidelines and ask questions/make comments about guidelines. Share individual successes and challenges while completing Group Assignment throughout the past week.</p> <p>3. Students look over the Be a STAR poster and Problem-Solving Flow Chart and be prepared to discuss.</p> <p>4. Students receive their Role Playing Cards and read through and prepare for their role. (Students can be paired or grouped in threes.)</p> <p>5. With each role-play, group members tell one or two ways that the problem can be handled. Then they have the whole group give other suggestions.</p> <p>6. Closure/Summary: Participants give suggestions for solving problems/conflict in school using the STAR method.</p> <p>7. Group assignment: Participants try one or two of the problem solving strategies until the next session.</p> <p>8. Students commit to giving their parents/guardians the Session Follow-up handout.</p>

Session #4 Follow-Up Activities

The STAR problem solving method might be presented as part of a problem solving or conflict resolution unit in classroom guidance to all students so that this becomes common language throughout the building.

[Teacher/Parent/Guardian Small Group Session Follow-up](#)

Session #4 Counselor reflection notes (completed after the session)

STUDENT LEARNING: How will students' lives improve as a result of what happened during this session?

SELF EVALUATION: How did I do?

IMPLEMENTATION PROCEDURES: How did the session work?

SESSION 4

Be a STAR



SESSION 4

Star Name Tag Patterns



SESSION 4

Role Play Cards

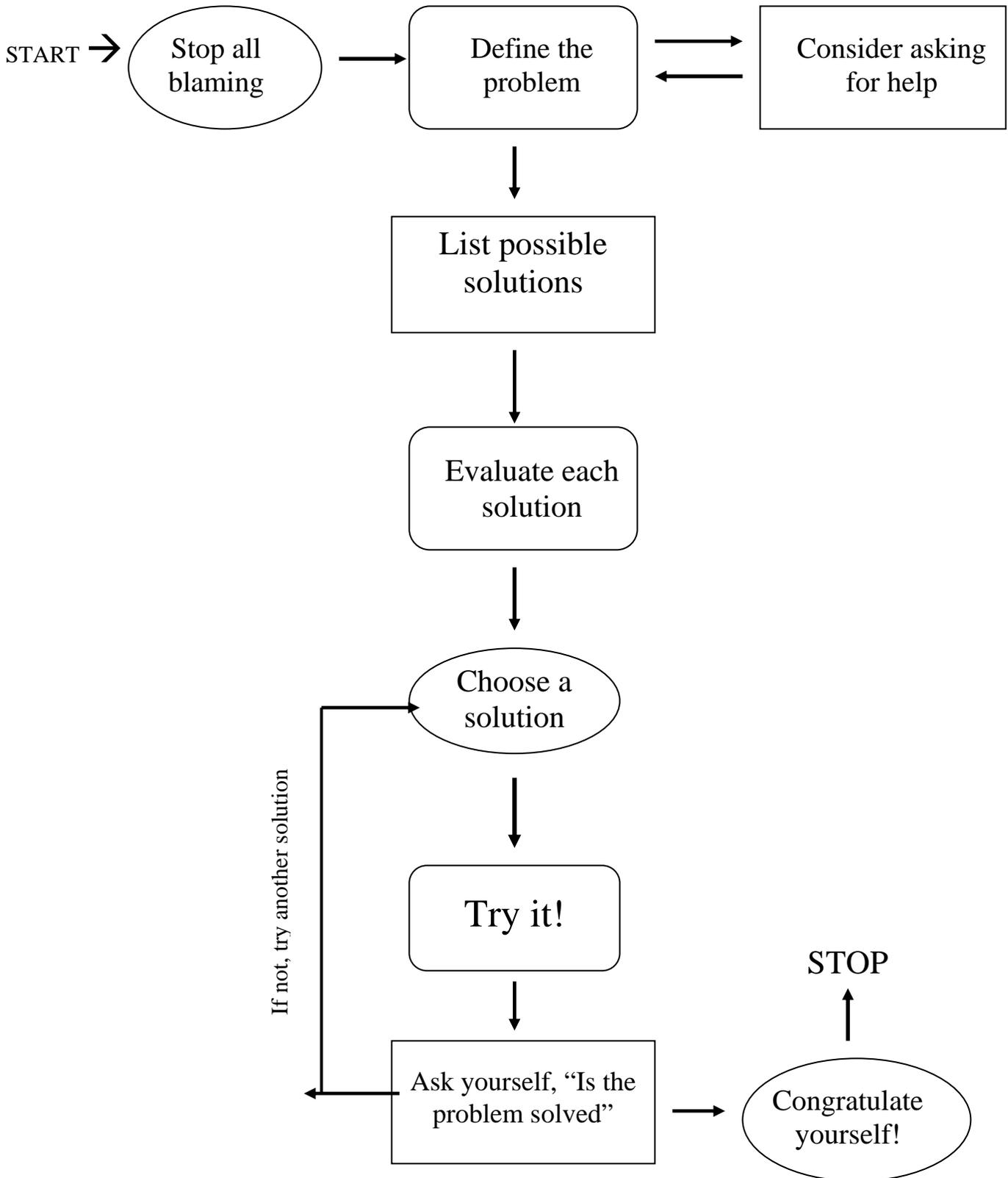
(Copy and cut out. These can be glued to 3 x 5 cards. Have students discuss how they would handle each situation)

At recess, someone takes the ball from you as you are playing with someone else.	As you do your class work, the person next to you draws on your paper.	In line to go to the cafeteria, someone moves in front of you.
At the drinking fountain, someone cuts in front of you.	While walking down the hall, the person behind you walks on the back of your foot.	While working in a group, a member of the group won't share the crayons.
In the bathroom, you see someone throw paper towels in the toilet and stop it up.	On the bus, someone calls you names and demands your lunch (lunch money).	You wear your favorite pair of socks to school and several of your classmates make fun of them.
Your friend asks to borrow paper from you at school. He/she does this all the time and never pays you back or shares supplies with you.	You go to McDonald's with a friend. You order a shake, hamburger, and fries. You pay, go sit down, and discover you did not get your fries.	You know that you handed in your math paper to your teacher but she does not have any record of it and now your grade is lower.

SESSION 4

Problem-Solving Flow Chart

When you have a problem, follow the steps on this chart. Begin where it says start. By the time you get to stop, you will have a solution to your problem.



Handout to be used in each session

Teacher/Parent/Guardian Small Group Session Follow-up

The Professional School Counselor has the option of sending this form to teachers/parents/guardians after each group session to keep these individuals informed of student's progress in the group. Students may complete this form during the session.

GROUP TOPIC: _____ **Session #** _____

Student's Name: _____ **Date:** _____

Today I met with my school counselor and other group members.

Session Goal: _____

**Today we talked about the following information during our group:
Circle one or more items.**

Friendship	Study Skills	Attendance
Feelings	Behavior	School Performance
Family	Peer Relationships	Other _____

Group Assignment:

I will complete or practice the following at school and/home before our next session.

Our next group meeting will be:

Date: _____ Time: _____

Additional Comments:

Please contact _____, Professional School Counselor at
_____ if you have further questions or concerns.

Group Title: Self Awareness

Session Title: I Was So Mad

Session # 5 of 6

Grade Level: 3-5

Estimated time: 30 min.

Small Group Counseling Session Purpose: This group will help students with strategies that can be used to help them maintain or improve their self awareness.

Missouri Comprehensive Guidance Standards:

PS.1 Understanding Self as an Individual and as a Member of Diverse Local and Global Communities

PS.2 Interacting With Others in Ways That Respect Individual and Group Differences

Missouri Comprehensive Guidance Concept(s):

PS.1.A. Self Concept

PS.1.B. Balancing life roles

PS.2 B. Respect for self and others

American School Counselor Association National Standard (ASCA):

Personal/Social Development

A: Students will acquire the knowledge, attitude, and interpersonal skills to help them understand and respect self and others.

Session #5 Materials (include activity sheets and/ or supporting resources)

[Small Group Counseling Guidelines](#) (from Session #1)

Scissors

Stapler

Pencils

Crayons

Markers

[Body Outline](#)

[Anger Booklet](#) (Pages 1 & 2)

Chart paper (or black board if available)

[Teacher/Parent/Guardian Small Group Session Follow-up](#)

Unit Assessments (attached to the Unit Plan)

[Teacher Pre-Post-Group Individual Student Behavior Rating Form](#)

[Teacher Feedback Form: Overall Effectiveness of Group](#)

[Request for Feedback from Parents/Guardians](#) (Cover Letter)

[Parent/Guardian Feedback Form: Overall Effectiveness of Group](#)

Session #5 Assessment

At the end of the session participants will have two to three strategies they can use to help them deal with anger and will have an anger booklet that lists or shows these strategies. They will also know what parts of the body are affected by anger.

Session #5 Preparation

Essential Questions: Is it okay to be angry? What can you do with your anger?

Engagement (Hook): [Body Outline](#) worksheet

Session #5 Procedures

Session #5 Professional School Counselor Procedures:	Session #5 Student Involvement:
<ol style="list-style-type: none"> 1. When participants enter they find a Body Outline worksheet at their seat. 2. Welcome students to the group and hand out their folders from last time. 3. Review Small Group Guidelines and group assignment from previous session. 4. Have students discuss what parts of their body are affected by anger and color those places on their Body Outline. 5. Have students discuss what causes them anger and state how they cope with their anger. Write student responses on chart paper or blackboard. 6. Hand out Anger Booklet (Pages 1 & 2) to each participant. (These should already be copied and cut and stapled for each participant.) 7. Closure/Summary: Ask participants to share at least one thing that they get angry about and one thing they can do to deal with their anger. 8. Group assignment: Encourage participants to try one anger control strategy in the upcoming week. 9. Distribute & Explain Teacher/Parent/Guardian Session Follow-Up Suggestions. Send a copy home with each student and provide a copy to classroom teacher(s) of students in group. 	<ol style="list-style-type: none"> 1. Participants find a Body Outline worksheet at their seat. 2. Students receive their folders from last session. 3. Students listen while school counselor reads the Small Group Guidelines and ask questions/make comments about guidelines. Share individual successes and challenges while completing group assignment throughout the past week. 4. Students color the places on their Body Outline that area affected by anger. 5. Students discuss what causes them to be angry and what they can do to deal with their anger. 6. Participants write their name on their Anger Booklet (Pages 1 & 2) and write or draw their answer for each page. (If needed, extra pages are included.) 7. Closure/Summary: Each participant shares one thing that they get angry about and one thing they can do to deal with their anger. 8. Group assignment: Participants are encouraged to try one anger control strategy in the upcoming week. 9. Students commit to giving their parents/guardians the Session Follow-up handout.

Session #5 Follow-Up Activities

[Teacher/Parent/Guardian Small Group Session Follow-up](#)

Session #5 Counselor reflection notes (completed after the session)

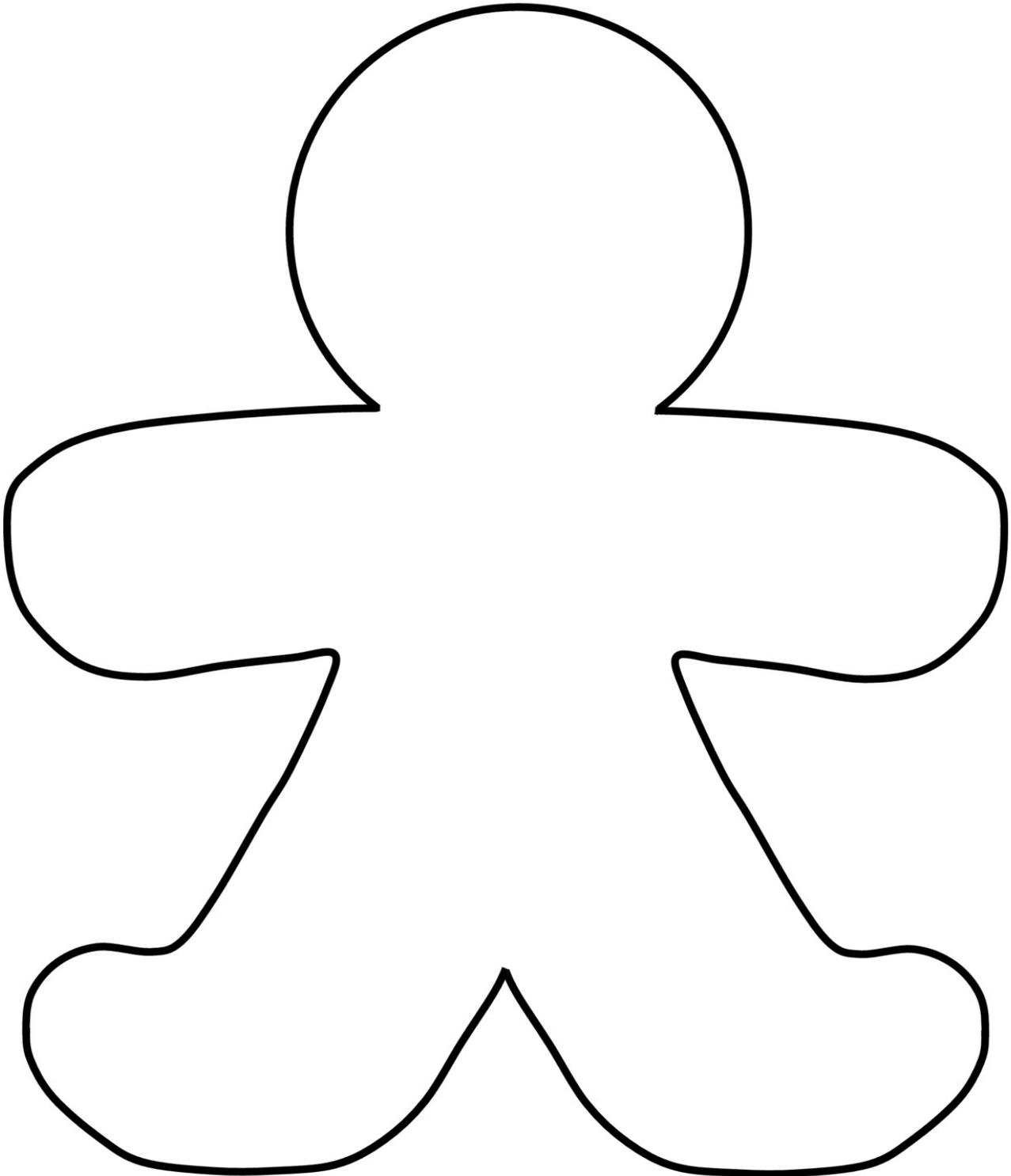
STUDENT LEARNING: How will students' lives improve as a result of what happened during this session?

SELF EVALUATION: How did I do?

IMPLEMENTATION PROCEDURES: How did the session work?

SESSION 5

Body Outline



SESSION 5

Anger Booklet (Pages 1 & 2)

<h1>Anger Booklet</h1>	<p>Things that make me angry</p>
<p>Ways I express my anger</p>	<p>Some things I can do when I am angry</p>

Teacher/Parent/Guardian Small Group Session Follow-up

The Professional School Counselor has the option of sending this form to teachers/parents/guardians after each group session to keep these individuals informed of student's progress in the group. Students may complete this form during the session.

GROUP TOPIC: _____ **Session #** _____

Student's Name: _____ **Date:** _____

Today I met with my school counselor and other group members.

Session Goal: _____

Today we talked about the following information during our group:

Circle one or more items.

Friendship	Study Skills	Attendance
Feelings	Behavior	School Performance
Family	Peer Relationships	Other _____

Group Assignment:

I will complete or practice the following at school and/home before our next session.

Our next group meeting will be:

Date: _____ Time: _____

Additional Comments:

Please contact _____, Professional School Counselor at

_____ if you have further questions or concerns.

Group Title: Self Awareness

Session Title: Review and Wrap Up **Session #** 6 of 6

Grade Level: 3-5 **Estimated time:** 30 min.

Small Group Counseling Session Purpose: This group will help students with strategies that can be used to help them maintain or improve their self awareness.

Missouri Comprehensive Guidance Standards:

PS.1 Understanding Self as an Individual and as a Member of Diverse Local and Global Communities
 PS.2 Interacting With Others in Ways That Respect Individual and Group Differences

Missouri Comprehensive Guidance Concept(s):

PS.1.A. Self Concept
 PS.1.B. Balancing life roles
 PS.2 B. Respect for self and others

American School Counselor Association National Standard (ASCA):

Personal/Social Development

A: Students will acquire the knowledge, attitude, and interpersonal skills to help them understand and respect self and others.

Session #6 Materials (include activity sheets and/ or supporting resources)

[Small Group Counseling Guidelines](#) (from Session #1)

Pencil

[Teacher/Parent/Guardian Small Group Session Follow-up](#)

[Group Certificate Of Completion](#)

[Student Feedback Form: Overall Effectiveness of Group](#)

Session #6 Assessment

Students will discuss and review what they have learned in the last 5 sessions. Then they will take the group evaluation.

Session #6 Preparation

Essential Questions: What did you learn that will help you in the future? Were these sessions helpful?

Engagement (Hook): Students get to keep their folders.

Session #6 Procedures

Session #6 Professional School Counselor Procedures:	Session #6 Student Involvement:
1. Review <u>Small Group Counseling Guidelines</u> with an emphasis on post-group confidentiality. Remind participants that even though the group is over, other group members will trust them not to tell other people about what another person said or did in the group. Remind students about your responsibility to	1. Students participate in review by telling what post-group confidentiality means for them.

Session #6 Professional School Counselor Procedures:	Session #6 Student Involvement:
<p>protect their confidentiality, too.</p> <ol style="list-style-type: none"> 2. Collect Parent Feedback Form; make arrangements to get the forms from participants who did not bring them to the group. 3. Return the students' folders and ask them to look through and think about all the things that they have covered in the past 6 weeks. 4. Go over each session and have students discuss what they learned from the session and if they are using any of the strategies. 5. Have students discuss their group experience and ask if they have any questions. 6. If a follow-up session is planned, remind students that it will be held in 4-6 weeks. 7. Group Summary/Closure: Students complete the Student Feedback Form: Overall Effectiveness of Group. Give each student a Group Certificate of Completion for completing the group. Celebrate the closing of the group. 	<ol style="list-style-type: none"> 2. Students give you their forms; if they do not have them, they commit to the day they will bring them to you. 3. Students receive their manila folders and look through them. 4. Students discuss, session by session, what they learned and what strategies they are using now. 5. Students discuss their group experience and also ask any questions they have. 6. Students confirm that they have written the date for the Follow-up Session in their assignment books/planners. 7. Group Summary/Closure: Students complete the Student Feedback Form. The students celebrate the closure of their group and accept their certificates.

Session #6 Follow-Up Activities

[Teacher/Parent/Guardian Small Group Session Follow-up Group Certificate of Completion](#)

Session #6 Counselor reflection notes (completed after the session)

STUDENT LEARNING: How will students' lives improve as a result of what happened during this session?

SELF EVALUATION: How did I do?

IMPLEMENTATION PROCEDURES: How did the session work?

Handout to be used in each session

Teacher/Parent/Guardian Small Group Session Follow-up

The Professional School Counselor has the option of sending this form to teachers/parents/guardians after each group session to keep these individuals informed of student's progress in the group. Students may complete this form during the session.

GROUP TOPIC: _____ **Session #** _____

Student's Name: _____ **Date:** _____

Today I met with my school counselor and other group members.

Session Goal: _____

**Today we talked about the following information during our group:
Circle one or more items.**

Friendship	Study Skills	Attendance
Feelings	Behavior	School Performance
Family	Peer Relationships	Other _____

Group Assignment:

I will complete or practice the following at school and/home before our next session.

Our next group meeting will be:

Date: _____ Time: _____

Additional Comments:

Please contact _____, Professional School Counselor at
_____ if you have further questions or concerns.



Group Certificate of Completion



Student's Name

successfully completed the

“ _____ ” group on _____.

_____ shows self awareness by



WAY TO GO!

Professional School Counselor

Note to Professional School Counselor: *The Student Feedback Form measures the student's perceptions of the overall effectiveness of the group using the same questions as teachers' and parents answer on their feedback forms. Students complete during the last session. This form is most appropriate for use at the upper elementary, middle school or high school levels.*

**SMALL GROUP COUNSELING
 STUDENT POST-GROUP PERCEPTIONS:**

STUDENT FEEDBACK FORM: OVERALL EFFECTIVENESS OF GROUP

We want your opinion about the effectiveness of your group. We appreciate your willingness to help us make our work helpful to all students. The survey is anonymous unless you want us to contact you.

My Name (optional): _____ Date: _____

Professional School Counselor's Name: _____

Small Group Title: _____

Before the group started, I wanted to learn _____

Because of the group, I have noticed these changes in my thoughts, feelings, actions:

Using a scale of 5 to 1 (5 being the highest and 1 the lowest), please circle your opinion about the following

What do you think?	5=High					1=Low
	5	4	3	2	1	
Overall, I would rate my experience in the counseling group as:	5	4	3	2	1	
I enjoyed working with other students in the group	5	4	3	2	1	
I enjoyed working with the counselor in the group.	5	4	3	2	1	
I learned new skills and am using the skills in school	5	4	3	2	1	
If other students ask me if they should participate in a similar group, I would recommend that they "give-it-a-try"	5	4	3	2	1	

Additional Comments for the Counselor:

OPTIONAL FOLLOW-UP SESSION

Group Title: Self Awareness

Session Title: How Are You Doing?

Session: Follow-up (4-6 weeks after last session)

Grade Level: 3-5

Estimated time: 30-45 minutes

Small Group Counseling Follow-up Session Purpose: The Professional School Counselor (PSC) may facilitate at least one more group session 4-6 weeks after the group has ended. This session helps the PSC track students' persistence and success in applying new skills and making changes in their lives. Students who participate in follow-up sessions after a group ends are more likely to maintain the gains made during the group sessions.

Missouri Comprehensive Guidance Standards:

PS.1 Understanding Self as an Individual and as a Member of Diverse Local and Global Communities

PS.2 Interacting With Others in Ways That Respect Individual and Group Differences

Missouri Comprehensive Guidance Concept(s):

PS.1.A. Self Concept

PS.1.B. Balancing life roles

PS.2 B. Respect for self and others

American School Counselor Association National Standard (ASCA):

Personal/Social Development

- A. Students will acquire the knowledge, attitudes and interpersonal skills to help them understand and respect self and others.

OPTIONAL FOLLOW-UP SESSION

Materials (activity sheets and/ or supporting resources are attached)

8 ½ x 11 paper for each participant

Crayons/markers/pencils

Alternative Procedure: Complete the [Post-Small Group Follow-Up With Students](#)

Discuss after completing.

OPTIONAL FOLLOW-UP SESSION Formative Assessment

This session does not require a formative assessment. It is a way for the PSC to measure students' perceptions of the group's effectiveness over time.

Alternative Procedure: Use the [Post-Small Group Follow-Up With Students](#) form as the procedure and the assessment for the Follow-up Session. The developmental level of your students will determine the usefulness of this alternative with younger students.

OPTIONAL FOLLOW-UP SESSION Preparation

Essential Questions: What does everyone have in common in this group?

Engagement (Hook): How are you different as a result of this group?

OPTIONAL FOLLOW-UP SESSION PROCEDURES

Professional School Counselor Procedures: Optional Follow-up Session

Note for PSC: The group follow-up session will give participants a chance to celebrate each other’s successes over time.

1. Welcome students back to the group. Remind them again about the [Small Group Counseling Guidelines](#) - they still hold true!

2. Invite each student to tell one thing he or she remembers from the group meetings. “I remember _____.”

3. Give each student an 8 ½ x 11 piece of paper. Instruct students to follow you as you fold your paper into fourths; unfold the paper and number the sections 1-4. Give the directions for the quadrants one at a time. Complete all quadrants. Invite students to share one quadrant at a time; discuss responses before going to the next quadrant.

1. With a picture or words, demonstrate what you learned from group.	2. With a picture or a word, describe the most useful thing you learned from the group.
3. With a picture or words, describe a skill you need to practice.	4. With a picture or words, explain how you have changed.

Alternative Procedure: An option for gathering student feedback during the follow-up session is to use the [Post-Small Group Follow-Up With Students](#) Discuss with students after they have completed the form.

Student Involvement: Optional Follow-up Session

1. Students participate in the review of the guidelines by telling what they remember and by reminding each other of what the guidelines mean.

2. Students contribute a concrete example of something they remember about the group.

3. Students follow directions of school counselor, asking clarifying questions as needed. They share their words/drawings. School counselor will acknowledge on-topic sharing.

Alternative Procedure: Students complete the form and discuss their responses.

OPTIONAL FOLLOW-UP SESSION Follow-Up Activities

If students completed the (optional) [Post-Small Group Follow-Up With Students](#) use the responses to prepare a data summary and report of group’s effectiveness.

OPTIONAL FOLLOW-UP SESSION Counselor reflection notes (completed after the session)

STUDENT LEARNING: How are all students’ lives improved as a result of what happened during this session?

SELF EVALUATION: How did I do?

IMPLEMENTATION PROCEDURES: How did the session work?

POST-SMALL GROUP FOLLOW-UP WITH STUDENTS

(OPTIONAL SESSION scheduled 4-6 weeks after group ends)

Level: Elementary/Middle School/High School

Note to Professional School Counselor: *The Follow-up Session Feedback Form for Students may be used in several ways, e.g., as an alternative "Procedure" for the post-group follow-up session, as a discussion guide, or (if post-group follow-up session is NOT scheduled) as a guide for interviewing individual students 4-6 weeks after the group ends. Adapt as appropriate for developmental level of students.*

FOLLOW-UP SESSION FEEDBACK FORM FOR STUDENTS

Name: _____ (optional) Date: _____

Questions:

1. What specific skills are you practicing now that the group is over?
2. What was the most useful thing you learned from the group?
3. What could you use more practice on?
4. How are things different for you now?
5. What Progress have you made toward the goals you set for yourself at the end of our group meetings?
6. How are you keeping yourself accountable?
7. What suggestions do you have for future groups?
8. Circle your overall experience in the group on a scale from 1 → 5 _____

1=Most positive activity in which I have participated for a long time
2=Gave me a lot of direction with my needs
3=I learned a lot about myself and am ready to make definite changes
4=I did not get as much as I had hoped out of the group
5=The group was a waste of my time
9. What specific "things" contributed to the ranking you gave your experience in the group?
10. What would have made it better?

Additional comments you would like to share with the school counselor: