

Seasons For Growth

Dear Parents/Carer,

Change and loss are issues that affect all of us at some stage in our lives. At Pakenham Consolidated School we recognise that when changes occur in families through death, separation, divorce or related circumstances, young people may benefit from learning how to manage these changes effectively. We are therefore offering a very successful educational Program called **Seasons for Growth**. This Program is facilitated in small groups of up to 8 children (with a minimum of 4 – 5 in each group before the program can run), at three different levels, level 1 is for children in Grades 1 & 2, level 2 is for children in Grades 3 & 4 and level 3 is for children in Grades 5 & 6. The Program is based on research that highlights the importance of social support and the need to practise new skills to cope effectively with change and loss. The Program focuses on issues such as self-esteem, managing feelings, problem-solving, decision-making, effective communication and support networks.

The Seasons for Growth Program is made up of a one hour session, once a week, over an eight week period. The Program then concludes with a 'celebration' session.

Seasons for Growth is facilitated by myself, Cindy Healey, along with a staff member from Connections or our school. We have received special training in the use of this Program. If you think your son/daughter would benefit from Seasons for Growth we would encourage you to talk to him/her about this. Should he/she decide to participate please fill in the attached form and return it to me in the Community Hub as soon as possible.

There will be a \$15.00 fee for this Program to help with the costs of the journals that your child will receive. Once your child has been placed into a group you will receive a confirmation letter and a request for payment. **Please do not send payment until you receive this request.**

Pakenham Consolidated School, with support from Connections, are pleased to be able to offer this important Program and we are confident that it will be a valuable learning experience for those who request to be involved.

If you have any questions about the Program please do not hesitate to contact me at the school on 59 411 511.

Cindy Healey
Seasons For Growth Co-ordinator

SEASONS FOR GROWTH APPLICATION FORM

Name of Child/Children: _____

Grade/s: _____

Name of Parent/Guardian: _____

Contact Number/s: _____

Please provide a brief summary of what change has happened at home:

Yes I would like my child/children to participate in the Seasons for Growth Program.

Parent/Guardian Signature

Yes I would like to participate in the Seasons for Growth Program.

Student/s Signature

Date