

Prevention/Intervention Program Opt-Out Form

Complete and return this form (to the attendance clerk by the second week of school) only if you **DO NOT** want your child to participate in the school intervention program.

A request to **opt out of the Prevention/Intervention Program will be in effect on the day it is received by the school and will remain in effect throughout the student's career at GMHS**, unless the opt-out request is rescinded by his or her parent in writing.

_____, in grade _____,

I understand that parental permission is not required for counseling and/or crisis intervention that is needed to maintain order, discipline, or a productive learning environment. I understand that, in opting to have my child excused from the prevention/intervention program, my child will be turned away from any involvement.

Date: _____

Signature of parent or guardian:

Student's name: _______(please print)

The program is directed by Mr. Scott Huhn. Scott is the owner of an outpatient treatment program, designed to help lives impacted by addiction and substance use through compassionate, evidence-based treatment that is personalized to fit each individual's needs. He he specializes in working with the school districts to design and implement intervention, prevention and treatment modalities. He wants families who are struggling to know that there is always hope. While he can relate to all individuals struggling with addiction, he especially enjoys working with teenagers and their families. Scott began his career as an addiction specialist in 1987 and has extensive experience in both inpatient and outpatient programs. He received his credentials as a certified alcohol and drug counselor-certified addiction specialist (CADC-CAS) from the prestigious California Consortium of Addiction Programs and Professionals. Additionally, he is a certified alcohol and other drug addictions specialist (CAS) through California Association of Addiction Recovery Resources.