

Student Counseling Services

Date: [Insert Date]

Dear [Student's Name],

Welcome to our counseling services. We want to assure you that your privacy and confidentiality are our top priorities. All information shared during counseling sessions will remain confidential and will only be disclosed with your consent or in accordance with legal and ethical guidelines.

We believe that a safe and trusting environment is crucial for effective counseling. If you have any questions or concerns about confidentiality, please feel free to discuss them with your counselor.

Thank you for trusting us with your concerns. We look forward to supporting you on your journey.

Sincerely,

[Counselor's Name]

[Title]

[Institution Name]

[Contact Information]