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## 1. Information about the Counsellor

Counsellor (1)

Counsellor (2)

Position

Position

Signature

Signature

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## 2. Information about the counsel

Date

Topic

concerning on....

Sponsorchild

ID-Number

Client

- Specification
- Counsel of Family
  - Counsel of Child
  - Counsel of Parents
  - Counsel of Teacher
  - Counsel of Friend

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## 3. Description of the Reason of Counsel

  
  
  
  
  
  
  

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## 4. Detailed Content of the Counsel

  
  
  
  
  
  
  

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## 5. Authenticated by Department Leader

Position

Signature

Full Name

Date