

Personal Resource Sheet

I understand that this sheet is to help remind me of ways I can keep myself safe. I realize that there is someone available to talk with me 24 hours a day. If I am having thoughts of suicide or thoughts of harming others, I can talk to one or more of the following people about those feelings:

	Name of Support	Phone	When
Supportive Family,			
24 Hour	<i>Washington County Crisis & Consultation Line</i>	503-291-9111	<i>Anytime (24/7)</i>
	<i>National Suicide Hotline</i>	<i>1-800-273-TALK (1-800-273-8255)</i>	<i>Anytime (24/7)</i>
	<i>Oregon Youth Line</i>	TEXT teen2teen to 839863 1-877-968-8491	<i>Anytime (24/7)</i>

I can help myself in the following ways:

Others will help me in the following ways:

I was informed that my privacy will be protected as much as possible and certain school staff will be notified of concerns as needed to help support me and keep me safe.

Our next meeting will be: *(Date & Time)* _____

Student Name _____

Student Signature & Date _____

Parent/ Guardian or Witness _____

Original To: Student/Family Copy To: Student Working File (not cumulative file)