

Permission to Contact

I, _____, would like to set up an appointment with the Columbia State Community College Counseling Center. I give permission for a counselor to contact me and leave a message at (phone number): _____.

Emails are not completely confidential as they belong to Columbia State. If you give permission to email in order to arrange a meeting, please list best email address: _____.

Signature: _____

Date: _____

The Counseling Center
Jones Student Center 142
Office: 931-540-2572
counselingsuccess@ColumbiaState.edu