

Student Assistance Program

What is the Student Assistance Program?

The Student Assistance Program (SAP) is a FREE, CONFIDENTIAL, rapid response intervention that helps students and families have better success in school.

Regardless of the difficulties, we are here to help!

Des Moines Public Schools is partnering with Mosaic Family Counseling Center, Inc to deliver services to students, parents, and families who need help with current difficult behaviors and planning for successful outcomes for their children.

Who is Eligible?

- Students
- Parents
- Families

How are services provided?

- In person at our office
- By telephone
- By video chat

Types of problems addressed:

- Feelings of anxiety and depression
- Relational struggles and Family stress
- Difficulty concentrating in class
- Aggressive behaviors
- Problems with drugs and alcohol
- Changes in behaviors at home or at school
- Trauma and trauma responses
- Social issues
- Adjusting to change
- Stress surrounding global pandemic

To access help or for more information

⇒ Call us at 515-724-8920 office staff is available Monday - Friday, 8:00 AM—5:00 PM

⇒ Send an email to info@mosaicfamilyinc.com

⇒ Visit our website > www.mosaicfamilyinc.com > Student Assistance Page

MOSAIC FAMILY Counseling Center Inc.

6200 Aurora Ave, Suite 305E

Urbandale, IA 50322

515.724.8920 (p)

712-545-2900 (f)

info@mosaicfamilyinc.com

www.mosaicfamilyinc.com



MOSAIC
Family
COUNSELING CENTER

Committed & Responsive,
Because We All Deserve to Be Happy
and Feel Capable in Life!

Programa de asistencia estudiantil

What is the Student Assistance Program?

El programa de asistencia estudiantil está diseñado para ser una intervención de respuesta rápida, GRATIS Y CONFIDENCIAL, para estudiantes y familias que buscan ayuda en tener más éxito en la escuela. A pesar de las dificultades, estamos aquí para ayudar.

El Sistema de la Escuelas Públicas de Des Moines se ha asociado con MOSAIC FAMILY Counseling Center, Inc. para ofrecer servicios a estudiantes y sus familias que necesitan ayuda con los problemas de comportamientos y ayudar a las familias a planear resultados exitosos para sus hijos.

¿Quién es elegible?

- Estudiantes
- Los padres de estudiantes
- Familias

Citas disponibles

- En persona en nuestra oficina
- Por telefono
- Por video

Problemas con los que podemos ayudar:

- Sentimientos de ansiedad o depresión
- Problemas relacionales y estrés familiar
- Problemas de concentración en clase
- Comportamiento agresivo
- Problemas con drogas o alcohol
- Pena y pérdida
- Cambios en comportamiento en casa o la escuela
- Trauma y respondiendo al trauma
- Problemas sociales
- Ajustando al cambio
- Estrés sobre la pandemia global

Para poner cita o para más información

- ⇒ Hable a 515-724-8920 de lunes a viernes entre 8:00 AM-5:00 PM
- ⇒ Mandé un correo electrónico a info@mosaicfamilyinc.com
- ⇒ Visita nuestra página www.mosaicfamilyinc.com

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**Student Assistance Program
Referral Form
(Short term assistance – up to 5 sessions)**

Student Name: _____ Date of Birth: _____

Student Address: _____

Parent/Legal Guardian Name: _____ Phone number: _____

Is the contact person listed above a court appointed legal guardian? Yes No

Language spoken by student: _____

Language spoken by parent: _____

School Name: _____

Referral source (if not family): _____

Referral source phone number: _____

Reason for referral:

Family has been informed of this referral?

Send this form to Mosaic Family Counseling Center Inc via fax at 712-545-2900
or email to info@mosaicfamilyinc.com



**School Based Mental Health Therapy
Referral Form
(Long-term therapy billed to *insurance*)**

Student Name: _____ Date of Birth: _____

Student Address: _____

Parent/Legal Guardian Name: _____ Phone number: _____

Is the contact person listed above a court appointed legal guardian? Yes No

Language spoken by student: _____

Language spoken by parent: _____

Student's insurance plan: _____ Insurance ID number: _____

School: Cowles Montessori

Downtown School

Samuelson

Referral source (if not family): _____

Referral source phone number: _____

Reason for referral:

Family has been informed of this referral?

Send this form to Mosaic Family Counseling Center Inc via fax at 712-545-2900
or email to info@mosaicfamilyinc.com