**COUNSELOR STUDENT INTERVIEW FORM**

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| **STUDENT;****Name and surname:****Class:****Its number:** |
| **ADVISOR;****Name and surname:****Title:** |
| **Interview Date ……………………………interview** |
| **Subject of the Interview** | ( ) Health Related Issues( ) Academic Subjects( ) Adaptation to School and Environment( ) Socio-economic Issues( ) Social, artistic, cultural and sports activities( ) Family Matters( ) Career planning( ) Psychological counseling and guidance( ) Other………………………...... (Specify) |
| **Recommended Solution** |
| **Explanation** |
| **Feedback from student** | Received ( )Not received ( )If not received, why: |
| **Time to get feedback from the student** |  |
| **Solution of the problem** | Provided ( )Failed ( )If not available, why: |

Advisor Approval Signature/Stamp