EXIT TICKET

Please fill out the <u>ENTIRE</u> card, fold it in half and turn it in to your teacher.

Name	Name
Teacher	Teacher
After learning about mental health,	After learning about mental health,
☐ I would like to talk to a mental health worker very soon.	☐ I would like to talk to a mental health worker very soon.
I would like to talk to a mental health worker sometime this week.	☐ I would like to talk to a mental health worker sometime this week.
I do not need to talk to a mental health worker now, but if/ when I do, I will reach out to	I do not need to talk to a mental health worker now, but if/ when I do, I will reach out to
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Please fill out the <u>ENTIRE</u> card, fold it in half and turn it in to your teacher.	Please fill out the <u>ENTIRE</u> card, fold it in half and turn it in to your teacher.
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