

**What is Alongside?**

[Alongside](#) is an app that provides research-based mental health support to students. It helps students' learn the social-emotional skills needed to navigate daily challenges, a critical component for long-term mental health and wellness. It uses chats, videos and journaling to help kids avoid turning small issues into big ones and is programmed to identify large problems and hand them over to a school official seamlessly. This self-directed resource will compliment Cumberland County Schools' other student services programs, it does not take the place of a school counselor, or school social worker. Alongside teaches skills using an innovative chatbot that combines the power of AI with therapist developed chat scripts to provide 24/7 accessible support. They have taken all necessary measures to ensure their app is safe for students. Severe issues are escalated to counselors and staff during school hours and 24/7 resources after hours. The app can be used on a browser (on chromebooks, laptops, or mobile browsers) or can be downloaded from the app store. The app is designed for middle, and high school students, and the company works exclusively with schools. Teens do not have to provide any personal examples or personal information other than their name, age, and an email address.

Cumberland County Schools will provide access to the Alongside app for every middle and high school student that completes this form. Fill out this form and an email will be sent soon (in a few days) to your student with instructions to sign up and start using the app! If you have further questions, please contact your student's school.

Student Name (Last, First): \_\_\_\_\_

Student Email Address: \_\_\_\_\_

Student Grade Level: \_\_\_\_\_

Student School: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Parent Email: \_\_\_\_\_

**STATEMENT OF CONSENT**

I have read this consent form and agree for my student to use Alongside. I understand that if I have further questions I can contact the school or [support@alongside.care](mailto:support@alongside.care).

\_\_\_\_\_  
Signature of Parent or Legal Guardian\_\_\_\_\_  
Date