## **HANDOUT 9C Family Problem-Solving Form** Meeting date: \_\_\_\_\_ Meeting time: \_\_\_\_\_ Place of meeting: \_\_\_\_\_ Person bringing up the problem \_\_\_\_\_\_ Person helping solve the problem: \_\_\_\_\_ Was the problem stated in a neutral way? ☐ Yes ☐ No Ideas to Solve the Problem Cons: \_\_\_\_\_ Cons: Solution(s) Chosen Date and time for follow-up meeting: Parent's signature: \_\_\_\_\_ Child's signature: \_\_\_\_\_