



## Helping Seeking Pledge

I am trained to recognize the signs of depression in myself and others, and capable of seeking help to prevent suicide attempts. If I see signs of depression or suicidal thinking in myself or in another person, I will seek help from a trusted adult.

**Those trusted adults include:**

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**Name** **Phone**

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**Name** **Phone**

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**Name** **Phone**

**Signed** \_\_\_\_\_  
**Name** **Date**