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Pertinent Medical Information (Identify serious medical condition(s), daily medication, dosage, reason):

PARENT/GUARDIAN INFORMATION

Parent(s)/Guardian(s): _____

Home Telephone: _____ **Work Telephone:** _____

Home Telephone: _____ **Work Telephone:** _____

Emergency Contact: _____ **Emergency Telephone:** _____

Limited English Proficiency (LEP): Yes No

If "Yes," identify primary language: _____

Level of English Proficiency: Written: Poor Fair Good Excellent

Spoken: Poor Fair Good Excellent

As of the Date of Referral, are parents/guardians aware of a possible change in placement?

Yes No

If "Yes," describe level of parent/guardian acceptance or resistance:

COMMUNITY/AGENCY INVOLVEMENT

Psychotherapy **Psychotherapist:** _____ **Telephone:** _____

Juvenile Probation **Probation Officer:** _____ **Telephone:** _____

Other (Specify):

RESIDENT/REFERRING DISTRICT INFORMATION

Resident School District: _____ **Referring District (If different):** _____

Case Manager: _____ **Title:** _____

Telephone: _____ **Extension:** _____

Signature: _____ **Title:** _____ **Date:** _____
Referring District Representative

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CHECKLIST OF SUPPORTIVE DOCUMENTATION

To ensure that the Referral/Application is processed in a timely manner, please be certain to attach copies of the most current information available:

Student will not be accepted without the following information:

- _____ **Current Individualized Education Program (IEP)**
- _____ **Student Health Card (With up-to-date immunizations)**
- _____ **Most recent evaluation and goals for OT, PT, and Speech.**
 - _____ **OT Evaluation / Goals**
 - _____ **PT Evaluation / Goals**
 - _____ **SPEECH Evaluation / Goals**
- _____ **Special Transportation (circle appropriate) Car Seat Booster Seat Harness Wheelchair Other**

Check if attached:

- _____ Current psycho-educational assessment reports administered within the past three years
- _____ Psychiatric evaluation report, if any
- _____ Printout of disciplinary actions and/or suspensions
- _____ Up-to-Date Attendance printout
- _____ Most recent report card
- _____ Listing of credits earned to date (secondary students only)
- _____ Behavior contracts, if any
- _____ Functional behavioral assessment, if any
- _____ Limited English Proficiency (LEP) students
 - Copy of home language survey English Language Proficiency Score
 - Testing accommodations
- _____ Other relevant information attached (specify):

Please Note: Inadequate and/or incomplete information is likely to delay decision-making process.