

**Warren County Schools  
School Assistance Team  
REFERRAL**

**SECTION 1: Demographics**

Student: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_  
Gender: \_\_\_\_\_ Ethnicity: \_\_\_\_\_ Parent/Guardian(s): \_\_\_\_\_  
Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ Student ID Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone(s): Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

**SECTION 2: Parent Conference/Contact Record**

A. First Contact/Attempt Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Person Making Contact: \_\_\_\_\_  
Position: \_\_\_\_\_

Type of Contact:     Conference     Letter/Note     Home Visit     Phone Call  
 Other: \_\_\_\_\_

Purpose: \_\_\_\_\_

Comments on Conference: \_\_\_\_\_

B. Second Contact/Attempt Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

School Person Making Contact: \_\_\_\_\_ Position: \_\_\_\_\_

Type of Contact:     Conference     Letter/Note     Home Visit     Phone Call  
 Other: \_\_\_\_\_

Purpose: \_\_\_\_\_

Comments on Conference: \_\_\_\_\_

(Please attach additional sheets as necessary.)

**SECTION 3: Student Strengths and Talents:**

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**Section 4: Concerns**

**Academic Concerns**, check all that apply **OR**  DOES NOT APPLY TO THIS STUDENT

- basic reading skills                       science                                       failing grades
- reading comprehension                 social studies                               homework
- decoding/ spelling skills                 written language                         current reading level
- math calculation skills                  test taking skills                         math reasoning skills
- other: \_\_\_\_\_

**Behavioral Concerns**, check all that apply **OR**  DOES NOT APPLY TO THIS STUDENT

- physical aggression                       refuses to complete assignments                 attendance
- verbal aggression                         defiance toward authority figures                 emotional concerns
- uses profanity                             does not follow school rules                       isolated
- disrespectful behavior                  peer/ adult relationships                         sleeps in class
- other: \_\_\_\_\_

**Attention/ Organizational Concerns**, check all that apply **OR**  DOES NOT APPLY TO THIS STUDENT

- inattentive/ daydreams                  disorganized                                       over-active
- easily distracted                          difficulty following directions                       makes careless errors
- difficulty retaining information         difficulty working independently                 often loses things
- impulsive                                  difficulty remaining seated                         restless/ fidgety
- other: \_\_\_\_\_

**SPEECH/ LANGUAGE CONCERNS**, check all that apply **OR**  DOES NOT APPLY TO THIS CHILD

- speech difficult to understand                 difficulty expressing wants/ needs                 stutters
- difficulty following directions                 speaks in a very high tone                         articulation errors
- speaks in a very low tone                       difficulty answering questions
- breathy or nasal quality to voice             difficulty understanding what is being said
- hesitations or pauses between words or phrases when speaking
- other: \_\_\_\_\_

Teacher's Signature \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_