Student Success Center School Referral

Referral Date:	Start Date:	_ls this referral non-disciplinary? □ Or disciplinary action? □
Student		Gender: Male □ Female □
Student ID#	Birthdate	Grade Ethnicity:
School	Attend	ance Secretary Email
Referring Staff/Phon	e	School Counselor/Phone
Parent/Guardian Na	me	
Phone (Home)	Phone	e (Cell) Phone (Work)
Address		
Are student and/or p	arent limited English speak	ing? No □ Yes □ Language/s
Family requires inter	pretation services? No 🗆	Yes □
Requested Assessm	nents: Drug & Alcohol	Mental Health □ Both MH & D&A □
Special Education id	lentified? No □ Yes □	Manifestation Determination? No \square Yes \square
If yes, what is handid	capping condition? LD	ED □ OHI □ Communication □ Other □
Student returns for a	ıfternoon classes? No □	Yes □ Transportation required? No □ Yes □
What is academic pl	an while student is out of so	chool?
REFERRAL INFOR	MATION	
Is the school willing	to support the return of stud	lent with wrap-around services? No □ Yes □
Have parents/guardi	ans been contacted regardi	ing referral to Student Success Center? No □ Yes □
PROBLEMATIC AC	TIONS AND BEHAVIORS	
Describe the probler	natic action/s and behavior/	s that led to this referral:
Please check all the		
☐ History of non-atte☐ Cultural barrier (lift		☐ Home or family problems☐ Low self-esteem
☐ History of suspens		□ Low self-esteem □ Domestic violence
☐ Language barrier	J.J.:	☐ Anti-social behavior

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☐ Juvenile Court involvement☐ Difficulty with peers	☐ Gang affiliation☐ History of A&D abuse/possession		
What interventions or services, if a counseling, drug/alcohol assessmen		udent resolve problems? (e.g., MSP,	
Strengths (behavioral, academic, socia	al) Concerns (be	havioral, academic, social)	
Additional comments:			
Are there any natural support system	ns available? (e.g., positive adults, m	entors, a job, hobbies, counselors)	
What services would you like School	Success Center to provide?		
REQUIRED STUDENT RECORDS 6	PRIOR TO INTAKE (please scan/e	mail to aclivas1@pps.net)	
All Students ☐ Grade report/transcript ☐ Discipline Records ☐ Attendance records	Students with a Delayed Expulsion Expulsion Hearing Notice Expulsion letter (Findings) Photocopy of weapon	For Special Education Students Current I.E.P. Manifestation Determination Transportation plans, if any Home Instruction (students may be able to meet with tutor at SSC at 12:30.)?	

Thank you for the information. We may call you to obtain further information for our program and to update you on the progress of this student.

Student Success Center @ Portland Public Schools 6433 NE Tillamook St.., Portland, Oregon 97123 Phone: 503-916-5494 | Fax: 503-916-2749

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