

Referral Form for Student Mental Health and Counseling Support

Student Name	Grade Level	Gender	Date Form Completed
Name of Person Making Referral	Contact # or Email for Person Making Referral		
	Contact # or Email for Parent/Guardian		
Do you want the student to know you made the referral? <input type="radio"/> Yes <input type="radio"/> No			

Has the student or family asked for:

Information about services? Yes No

An appointment to initiate help? Yes No

Someone to contact them to offer help? Yes No

Please rate the urgency of this request by circling the appropriate number:

Not Urgent Moderately Urgent Very Urgent

1 2 3 4 5 6 7 8 9 10

Please check area(s) of concern that are demonstrated on a consistent/frequent basis:

ACADEMIC

- Grades falling significantly
- Skipping classes
- Excessive tardiness
- Low motivation/effort
- Does not complete homework
- Has low reading skills
- Has difficulty with math skills
- Has difficulty with written language
- Inverts/reverses numbers/letters
- Possible auditory/vision difficulties
- Difficulty with peers in classroom
- Unable to follow directions
- Inability to stay on task/complete assignments
- Easily distracted
- Falling asleep in class
- Requires frequent one-on-one attention
- Other:

APPEARANCE

- Appearance/hygiene neglected
- Bloodshot eyes
- Bruises
- Needle or burn marks
- Weight loss/gain (dramatic/sudden)
- Other:

BEHAVIOR

- Abusive language/profanity
- Alcohol/drug abuse (suspected or known)
- Argumentative
- Attention seeking
- Bizarre thoughts or behaviors (i.e., hearing voices, seeing things, eating inedible objects, rocking, head banging)
- Cutting/scratching/hurting self
- Destruction of property
- Disruptive
- Eating problems (too much or too little)
- Excessive or uncontrollable crying
- Gang involvement
- Inappropriate displays of affection/clingy
- Irritable/angry/hostile
- Isolated/withdrawn
- Lethargic/low energy
- Negative peer influences
- Physically assaultive toward others/fighting
- Pregnant
- Preoccupied with death
- Rejected by peers/picked on
- Self-esteem problems
- Separation anxiety
- Sexually assaultive toward others/vulgar
- Suffered sexual and/or physical assault
- Talks about suicide
- Threatening/intimidating remarks/bullying
- Worrying/nervousness
- Other:

DIFFICULTY MAKING TRANSITIONS

- New student having trouble with adjustment
- Trouble adjusting to new living situation

FAMILY/ENVIRONMENT

- Homeless (no fixed address, living with others)
- Inadequate food source
- Reports abuse (physical, sexual, emotional)
- Speaks with anger about parents/family
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