

Student Assistance Program Referral Form

Student's Name: _____

Name of Individual Making Referral: _____

Date of Referral: _____

To be completed by SAP Team:

Discipline Concerns:	Yes	No
Guidance Concerns:	Yes	No
Nurse Concerns:	Yes	No

DISCLAIMER: PLEASE CHECK OBSERVABLE BEHAVIORS ONLY. NON-OBSERVABLE INFORMATION AND CONCERNS SHOULD BE SHARED WITH A SAP TEAM MEMBER. PARENTS/GUARDIANS MAY HAVE ACCESS TO THIS FORM.

Reason for Referral (Select all that apply):

Attendance:

- Excessive absences
- Wandering in the halls
- Tardiness to class/school
- Asks to leave the room often
- Asks to leave early

Physical Appearance:

- Unexplained, frequent physical injuries
- Cold-like symptoms
- Constant cough
- Smoke odor on clothes
- Smoking
- Self-abuse
- Body odor
- Burn marks
- Weight (loss/gain)
- Slurred speech
- Agitated
- Neglects personal appearance
- Hyperactivity/nervous
- Coloration (pale, flushed)
- Glassy, bloodshot eyes

Home & Family:

- Speaks of anger towards parents
- Recent loss (moved, divorced, death)
- Speaks of troubles in family (financials, emotional, etc.)
- Speaks of running away
- Other sibling problems

Peers:

- Change in friends
- Older social friends
- Significantly younger friends
- Peer exclusion
- Avoids peers
- Fighting with peers
- Sudden popularity
- Inappropriate displays of affection

Behaviors:

- Attempts to sleep in class
- Destruction of property
- Defiance of rules
- Inappropriate responses
- Seeking adult advice, without specific problem
- Extreme negatives
- Acts defensive
- Lethargic
- Crying
- Fighting
- Withdrawn
- Lying
- Argumentative
- Memory loss
- Attention getting behavior
- Obscene language/gestures
- Uncontrolled giggling
- Always borrowing money
- Consistently blaming others & denying behaviors
- Sudden outbursts of anger
- Mood swings
- Excessive talking

Alcohol & Other Drugs:

- Others report concern about use/abuse (students, teachers, parent)
- Constant wearing D&A related clothing
- Speaks of parties with D&A are

Extra-Curricular Activities:

- Loss of eligibility
- Missed practice without substantial reason
- Dropped out of activity (Name of activity _____)

Academic Performance:

- Grades failing markedly
- Work incomplete/missing
- Expresses extreme dissatisfaction with school
- Handwriting worsening
- Unprepared for class
- Lack of motivation
- Poor writing skills
- Does not follow directions
- Decrease in participation
- Not always staying on task/always behind
- Poor short-term memory
- Cheating
- No effort
- Poor reading skills
- Other things I have seen or heard

Check if you want to discuss referral with a SAP Team Member