



Educational Service Center
 4228 Two Mile Road
 Bay City, MI 48706-2324
 District Attendance Officer: Tamra Reinbold
 Phone: 989.667.3253
 Fax: 989.667.3202

TRUANCY REFERRAL FORM

Date of Referral: _____ Student Referred for Truancy in Previous Year: _____

STUDENT INFORMATION

Student Name: _____

Address: _____ City: _____ Zip: _____

Birth date: _____ Male Female

SCHOOL INFORMATION

DATE PARENT (S) NOTIFIED BY ADMINISTRATOR WITH LETTER OR PHONE CALL THAT A TRUANCY REFERRAL WOULD BE SENT

IF ATTENDANCE DID NOT IMPROVE: _____

Teacher/Counselor: _____ Grade: _____

School Name: _____ Date Enrolled: _____

Address: _____ City: _____ Zip: _____

PARENT INFORMATION

Father's Name: _____ Home Phone #: _____

Address: _____ City: _____ Zip: _____

Employer: _____ Work Phone #: _____

Mother's Name: _____ Home Phone #: _____

Address: _____ City: _____ Zip: _____

Employer: _____ Work Phone #: _____

Child's Legal Guardian: _____

**ATTENTION ALL SCHOOLS: A COPY OF THE STUDENT'S ATTENDANCE RECORD
 MUST BE INCLUDED WITH THIS TRUANCY REFERRAL.**

BAISD USE ONLY

Letter # 1: _____ (date) Letter # 2: _____ (date)



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ADMINISTRATIVE CHECKLIST

To facilitate the handling of this case, please complete the following information.

- Alternate method of handling attendance problem available? Yes No
 School counselor or social worker, physician, counseling agency, social services or Circuit Court Family Division's Crisis Intervention Program-especially if parents are cooperating and willing to go for help? Cooperative efforts work better than coercion).

PARENTS

- Parents notified by phone or letter that the school was obligated by law to make a truancy referral to BAISD if attendance didn't improve? Yes No
- Has a school/parent meeting regarding attendance already been held this year? Yes No
- Comments: _____
- Parents cooperating with school? Yes No

STUDENT

- Absence primarily related to illness? Yes No
- Absence due to homelessness/transportation? Yes No
- Absence primarily related to suspensions? Yes No
- Prior history of attendance problems? Yes No
- Student Passing?
 Grades Are: _____ A's _____ B's _____ C's _____ D's _____ E's
- School Counselor or Social Worker already actively involved? Yes No
 Name: _____
- Student involved with Circuit Court-Family Division (formerly Juvenile Court)? Yes No
 Probation Officer/Caseworker: _____
- Student/family already in counseling? Yes No
 Name of Agency/Counselor: _____

SPECIAL EDUCATION/ALTERNATIVE EDUCATION

- Student classified as special education
 EI _____ LD _____ EMI _____ POHI _____ SLI _____
 Other-Specify: _____
- Need to determine special education eligibility? Yes No
- Should an IEP be called before truancy referral? Yes No
- Should student be referred to an alternative education program? Yes No