



Student Referral Form

(To be completed by the student's current teacher, current administrator, or current principal.)

Student Applicant's Full Name: _____

Current School: _____ Current Grade Level: _____

Name of person filling out this form: _____ Title: _____

Subject(s) Taught to Student (if applicable): _____

School Name: _____ Teacher's Contact Email: _____

Teacher's Contact Phone Number: _____

Does the student have a current IEP/Accomodations? If yes, please provide details:

Yes ___ No ___

Explain:

Was the student expelled from current or previous school? If yes, please explain.

Yes ___ No ___

Explain:

Has the student ever been suspended at current school? If yes, please explain.

Yes ___ No ___

Explain:

Does the student have more than 15 absences from school within an academic school year?

Yes ___ No ___



Overall student conduct is as follows:

Attribute	Below Average	Average	Good	Excellent	Outstanding
Academic Performance					
Respect for Peers and Faculty					
Effort & Work Ethic					
Participation & Engagement					

The student's behavior was generally described as:

- Consistently respectful and compliant with school expectations
- Typically appropriate with occasional redirection needed
- Required periodic administrative intervention
- Required frequent disciplinary intervention

Overall Recommendation

- Student left in good standing
- Student left with pending disciplinary matter
- No safety concerns noted
- Additional information available upon request

Signature: _____ Date: _____