

WOODBURY HEIGHTS ELEMENTARY SCHOOL
INTERVENTION AND REFERRAL SERVICES TEAM

INITIAL REQUEST FOR SERVICES
Confidential

TO: Intervention and Referral Services Team

FROM: _____

DATE: _____

STUDENT: _____

Reasons for request for assistance - must be for school-based issues, i.e., academics, behavior, school health:

Specific and descriptive observed behaviors - hearsay or subjective comments will not be accepted:

Please list all teachers and/or specialists who have contact with this student.

Please indicate the types of interventions you have tried prior to this request for assistance.

- ____ 1. Spoke to student privately after class.
 ____ a) Explained class rules and expectations.
 ____ b) Explained my concerns.
- ____ 2. Gave student help after class/school.

- _____ 3. Changed student's seat.
- _____ 4. Spoke with parent on the telephone.
- _____ 5. Gave student special work at his/her level.
- _____ 6. Checked cumulative folder.
- _____ 7. Held conference with parent in school.
- _____ 8. Sent home notices regarding behavior/school work.
- _____ 9. Arranged an independent study program for student.
- _____ 10. Gave student extra attention
- _____ 11. Set up contingency management program with student.
- _____ 12. Assigned student detention.
- _____ 13. Referred student to guidance.

- 14. Other (Please explain.) _____

Staff Member's Signature: _____ Date: _____

Place the completed forms in a sealed envelope and deliver to the I&RS Team mailbox.

By submitting this form, I understand that I will be a full partner with the I&RS team for the resolution of the identified concerns.