

Vermilion County Res-Q Truancy Referral Form

The following information MUST be COMPLETELY filled out before we can process this referral.

Primary reason for referral: (check one)

Truant: has at least one unexcused absent Chronic Truant: truant from school 10% of previous 180 days
 Receiving Public Aid

ATTENDANCE DATA:

of Days Absent: Excused Unexcused Suspended Note: (days enrolled or out of # of days possible)

Characteristics common to school failure: (check all that apply)

Low reading and/or math scores Multiple discipline referrals
 Economically challenged IEP
 Attendance in multiple Schools Suspensions
 Lack of interest/motivation in school Unstable family (broken home, single parent, homeless)
 Probation McKinney Vento Student

Student has been retained (how many times , grade (s))

STUDENT INFORMATION

Last Name First Name Middle Initial

Student Address

DOB: Grade: Gender: **State I.D.#**

Race: White Black Hispanic Other

Special Ed.: - IEP Date:

PARENT/GUARDIAN INFORMATION

Father's Name: Mother's Name:

Father's Address: Mother's Address:

Father's Phone: Mother's Phone:

Emergency Contact #:

Parents' Marital Status:

If divorced or separated, who has legal custody?

Brother's and Sister's Name (s)/School

Please provide the dates that any interventions that have been provided:

- 1. Parent Contacts by Phone or Letter:
- 2. Principal/Student Conferences:
- 3. Counselor/Student Conferences:
- 4. Home Visits:
- 5. Attendance Behavior Modification Plans:
- 6. Community Agency Collaborations (Name (s) of agency):

Comments/Additional Information:

- 1. Parent Contacts by Phone or Letter:
- 2. Principal/Student Conferences:
- 3. Counselor/Student Conferences:
- 4. Home Visits:
- 5. Attendance Behavior Modification Plans:
- 6. Community Agency Collaborations (Name (s) of agency):

Other Comments/Additional Information: _____

**Please attach attendance record. Indicate truant or unexcused dates.
Please attach any discipline reports/records.**

Signature of Building Administrator: _____

Referring School: _____ Date: _____

Please return referral form to:

Maria Isabel Sermersheim
Vermilion County Truancy Coordinator
 Regional Office of Education
 200 South College, Suite B
 Danville, Illinois 61832
 Phone: 217-431-2668
 Fax: 217-431-2671
 Email: msermersheim@roe54.org