



Date of Referral

**MENTAL HEALTH INTERVENTION SPECIALIST (COMMUNITY AGENCY)
SOCIAL AND EMOTIONAL SUPPORT SERVICES REFERRAL**

Student's Last Name		Student's First Name	Gender	Student's ID No.
Current School	Grade	Homeroom # / Teacher		Date of Birth
Home Address (Include Apt. No.)			Zip Code	Home Telephone
Parent / Guardian's Name		Parent / Guardian Notified of Referral? <input type="checkbox"/> Yes <input type="checkbox"/> No		Alternative Telephone

Name & Title of Person Initiating Referral	Contact Information	Best Time to Contact
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Please Circle One:

Applewood
 Beech Brook
 Bellefaire Jewish Children's Bureau
 Guidestone
 Cleveland Christian Home
 Murtis H. Taylor/MDC
 Other _____

Other Social Service Agency Involvement <input type="checkbox"/> DCFS Involvement <input type="checkbox"/> Not Available <input type="checkbox"/> Mental Health <input type="checkbox"/> Other: <input type="checkbox"/> Court System	Name of Agency	Type of Support Service
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Rate all of your concerns. Circle the top three concerns.

N/A = Not observed, 1 = Never, 5 = Always

Aggression: Arguing, forcing submission, bullying, fighting, stealing N/A 1 2 3 4 5
Disruptive Classroom Behavior: Defiance, noncompliance (teacher/school), not following rules, out of designated area N/A 1 2 3 4 5
Hyperactive Behavior: Tantrums, disturbing others, excess energy N/A 1 2 3 4 5
Withdrawn Behavior: prefer being alone, non-participation, unresponsive to social initiations, not talking with others N/A 1 2 3 4 5
Depressed Mood: Overall sadness, low/restricted activity levels, crying, poor appetite N/A 1 2 3 4 5
Unassertiveness: Shy, being timid, not standing up for one's self N/A 1 2 3 4 5
Anxiety: Acting in fearful manner, appears overly stressed, inability to cope with daily functioning N/A 1 2 3 4 5
Other:
Suspected Neglect / Abuse (Check all that apply) <input type="checkbox"/> physical <input type="checkbox"/> emotional <input type="checkbox"/> sexual <input type="checkbox"/> educational

Please provide detail to support your concerns or attach supporting documentation.