

STUDENT:

PARENT REFERRAL TO I&RS COMMITTEE

Dutch Neck Maurice Hawk
Town Center Wicoff
Village Millstone River
Community MS Grover MS
WWPHS North WWPHS South
(please circle one)

Date Received by I&RS

DOB:

Intervention & Referral Services (I&RS) is a multidisciplinary school-based committee that assists educators to plan, deliver and monitor interventions to support students who are experiencing learning, behavioral and/or health difficulties. Each school coordinates a system for planning and delivery of intervention and referral services designed to address the student's needs in a general education setting. Parents making a referral should complete this form and return it to the I&RS coordinator at their child's school. Any additional documentation you can provide, such as a medical diagnosis or evaluation, is encouraged but not required.

COUNSELOR/TEAM:	Gr.:
PARENT NAME(S):	
PHONE:Home ADDRESS:	Cell
EMAIL:	
	to the I&RS Committee for a review of their educational program. (s):
or a medical related issue? Yes No If yes, pl	cerns about your child's academic performance, classroom behavior lease explain:
2	staff when working with your child?
Please describe any significant factors (developm ability to benefit from the current educational pro	nental, medical or situational) you feel may impact your child's ogram:
	school system or private provider) or received any outside services yes, what evaluations, supports or services and by whom? When?
Does the school have a copy of that evaluation?	Yes No
SIGNATURE:	DATE:
Parent or Legal Guard	ian