

CONFIDENTIAL

Faculty/Staff Referral Form for Student Services Intervention

To: **Deborah Kennedy, Dean of Student Services**

From: _____ Date: _____
(Faculty or Staff Member)

Re: _____ (Student's Name) _____ (Student/Empl ID) _____ (Course Number and Section)

My concerns with this student include (check all that apply):

- _____ Student is a disruption to class and is impacting the learning of others
- _____ Student shows insufficient preparation for class, lack of participation or attendance
- _____ Student appears withdrawn, isolated, or his/her behavior has changed significantly over time
- _____ Student has approached me with a personal concern that needs a referral
- _____ Student has had a personal conflict with another student or me
- _____ Student shows non-compliance with class structure, rules, code of conduct & expectations
- _____ Other _____

Other information (if any):

Would you like to receive follow-up information concerning the student's progress as a result of your referral if this student is willing to sign a release of information form? Yes () No ()

Please return this form in an envelope to Deborah Kennedy, Dean of Student Services

College policies on confidentiality of student information will be respected and no personal matters are shared without the permission of the student. However, the benefits of sharing information with the professor may be one of the recommendations discussed with the student.

FOR OFFICE USE ONLY:

Referral passed along to (check all that apply): Academic Dean Threat Assessment Team
 Retention Services Personal/Crisis Counselor Judicial Affairs

FOR OFFICE USE ONLY: FOLLOW-UP REPORTING

Referral was handled by: _____
(Name) (Title, Dept.)

Important Information to Note (may include dates, people involved, outcomes):

IF REFERRAL WAS PASSED ALONG TO ANOTHER DEPARTMENT FOR ADDITIONAL ASSISTANCE:

Referral was handled by: _____
(Name) (Title, Dept.)

Important Information to Note (may include dates, people involved, outcomes):

Date document was completed and filed: _____

Signed by: _____
(Name, title of college official completing report)