



## SJC Students' Referral Form

Date \_\_\_\_\_ Class \_\_\_\_\_

Student Name \_\_\_\_\_ Age: \_\_\_\_\_

Teacher \_\_\_\_\_

1. What have you noticed about the student overall behaviour?

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2. Has there been any change in the student's recent academic performance?

Yes \_\_\_\_ NO \_\_\_\_ (Explain where necessary).

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3. Does the student interact well with the other students in the class?

Yes \_\_\_\_ No \_\_\_\_ (Explain where necessary).

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4. Do you feel that the student has poor anger management skills?

Yes \_\_\_\_ No \_\_\_\_

5. Has the student recently acted out in class?

Yes \_\_\_\_ No \_\_\_\_ (Explain where necessary).

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6. Have you personally tried to address the problem with the student?

Yes \_\_\_\_ No \_\_\_\_ (Explain where necessary)

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7. Has the student been missing a lot of class recently?

Yes \_\_\_\_ No \_\_\_\_

8. Have you observed any of the following problems with the student?

Dress code violation \_\_\_\_ Public display of affection \_\_\_\_

Disrespectful to classmates \_\_\_\_ Disrespectful to teachers \_\_\_\_

Other \_\_\_\_\_

9. What specific issues (different from the above) would you like to be addressed with the student?

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