



# Referral for RESA Truancy Services

Terry Harrington, Truancy Officer, (810) 455-4146  
Email this completed form and documentation to: [truancy@sccresa.org](mailto:truancy@sccresa.org)

Referral Date: \_\_\_\_\_

School: \_\_\_\_\_ Referred by \_\_\_\_\_

District: \_\_\_\_\_ Position: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Student: \_\_\_\_\_  Male  Female Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number: \_\_\_\_\_ Grade: \_\_\_\_\_ Repeating this grade:  Yes  No

Custodial parent/guardian: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Non-custodial parent/guardian: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Total days:** Absent: \_\_\_\_\_ Medically excused: \_\_\_\_\_ Suspended: \_\_\_\_\_ Tardy: \_\_\_\_\_

Is the student subject to a "plan" that may impact the truancy process?  Yes  No

Describe: \_\_\_\_\_

## The Communication / Contact Log on the next pages must minimally contain answers to the following questions:

1. Who from your building/district has contacted the parent/guardian about attendance?
2. What are the dates/times of that contact?
3. If unable to make contact, describe efforts or attempts?
4. When was a formal letter(s) sent to the parent/guardian? (*Attach copies*)
5. How has the student's absences impacted his/her success at school? (*Such as failing to meet grade level expectations, failing grades, missing assignments, etc.*)
6. What additional supports has the school/district offered/provided to improve attendance?

**Provide an up-to-date Student Attendance Detail Report.**

**\*If necessary, attach/submit copies of any other supporting documentation.**

**FOR RESA USE** Supporting document received: \_\_\_\_\_ Notice to parent: \_\_\_\_\_

Notice to parent for hearing: \_\_\_\_\_ Hearing held: \_\_\_\_\_ Court/Prosecutor referral: \_\_\_\_\_



