

Union District Schools  
Student Services  
**Child Study Team – Initial Referral Form**

Teacher \_\_\_\_\_

**PURPOSE(S):** ☐ DISCIPLINE/BEHAVIOR ☐ ACADEMIC ☐ ATTENDANCE

**Student Name:** \_\_\_\_\_ **Student #:** \_\_\_\_\_

**Grade:** \_\_\_\_\_ **D.O.B.:** \_\_\_\_\_ **School:** \_\_\_\_\_ **Race:** \_\_\_\_\_ ☐ M ☐ F

**Referring Person:** \_\_\_\_\_ **Position:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Previous Parent Contacts:** (attach to this form): Date(s): \_\_\_\_\_ Method: ☐ Phone ☐ In person

I would like assistance of the Team in working with the above named student because of the following reason(s) {Be Specific}: \_\_\_\_\_

**TEACHER OBSERVATION**

**Beginning Date** \_\_\_\_\_ **Ending Date:** \_\_\_\_\_ [(0) Never, (1) Sometimes or (2) Frequently]

Characteristics	Characteristics	Characteristics
Does what is asked of him/her	Seeks excessive attention	Difficulty understanding oral directions
Offers to help	Inattentive in class	Difficulty understanding written directions
Tries hard	Loss of interest	Deficient in vocabulary
Appears happy/ cheerful	Easily Distracted	Reverses or confuses letters, words, numbers
Organizer/ leader	Nervous/ excitable	Difficulty in math
Bored with routine tasks	Gripes/ complains	Difficulty in reading
Gives up / "Care-less" attitude	Excessive talking/Loud/ rowdy	Difficulty in written expression
Tired or lethargic	Makes wisecracks/ talks back	Uses incorrect grammar
Vision complaints	Obscene language/gestures	Difficulty copying from board / text/ paper
Change in weight	Defiance of rules	Concrete learner
Depression / expressionless	Exaggerating	Requires repetition of instruction
Suicide attempt	Tantrums	Inconsistent/low test grades
Discusses death/suicide	Defensive/Argumentative	Slow to react or follow directions
Withdrawn/secluded	Excessive out of seat / out of area	Disorganized work habits
Changes moods rapidly	Unusually curious	Difficulty completing tasks in allotted time
Needs constant reassurance	Cries readily	Difficulty concentrating
Change in friends/age group	Acts frightened/ timid/ shy	Confused easily
Has few friends /peer problems	Irresponsibility/blaming	Poor memory for names/ dates
Aggressive in social interactions	Poor fine motor coordination	Difficulty with verbal expression
Sudden outburst/verbal abuse	Poor gross motor coordination	Speech difficult to understand

I have attempted the following strategies this year in an attempt to solve the problem(s): \_\_\_\_\_

I have noted the following outcomes of these attempted strategies (Be specific in measurable terms): \_\_\_\_\_

**Student Strengths:** \_\_\_\_\_

**Attendance:** Days Absent \_\_\_\_\_ **Grade(s) Retained:** \_\_\_\_\_ ☐ NA **Grade(s) Admin. Placed:** \_\_\_\_\_ ☐ NA ☐ AIP

**Previously Screened/Evaluated:** ☐ Yes ☐ No **Date:** \_\_\_\_\_ **Reading Level** \_\_\_\_\_ **Math Level** \_\_\_\_\_

**FCAT / SAT-10 Test Date:** \_\_\_\_\_ **SSS Read** \_\_\_\_\_ **NRT Read** \_\_\_\_\_ **SSS Math** \_\_\_\_\_ **NRT Math** \_\_\_\_\_ **Writing** \_\_\_\_\_

**Special Programs:** ☐ Yes ☐ No **If Yes, What programs?** \_\_\_\_\_

**CST # 1 (11/2005)**

**Copies to:** ☐ District ☐ School ☐ Teacher