

**SOUTHERN PLAINS EDUCATION COOPERATIVE
PROGRAM REFERRAL FORM**

1200 N. Park St. ~ Fairmont, MN 56031 ~ Phone ~ 507-235.4099 ~ Fax ~ 507-238.2361

This form should be completed by the IEP team referring the student for Level IV Special Education placement. Please complete the form as thoroughly as possible. All information is essential in determining appropriate educational programming.

Program: _____ MARSS #: _____
_____ Bridges _____ PALS _____

Student Name: _____ DOB: _____

Age: _____ Grade: _____ Resident District: _____

Student lives with: MOM DAD OTHER: _____

Mom: _____
DOB: _____
Address: _____
City/State/Zip: _____
Home Phone: _____
Cell Phone: _____
Email: _____
Employer: _____
Work Phone: _____

Dad: _____
DOB: _____
Address: _____
City/State/Zip: _____
Home Phone: _____
Cell Phone: _____
Email: _____
Employer: _____
Work Phone: _____

Siblings: _____ Age: _____ Where Living: _____

If the student does not live at any of the above addresses, where does the student live?
Address: _____

Does the student receive services outside of school: (include contact information if possible)

Family Doctor: _____
Clinic or Hospital: _____

Psychiatrist: _____
Clinic/Hospital: _____

Therapist/Counselor: _____
Agency: _____

County Case Manager: _____
County: _____

**SOUTHERN PLAINS EDUCATION COOPERATIVE
PROGRAM REFERRAL FORM**

Probation Officer: _____

County: _____

Current Medication: (Include dosage and frequency if known)

Medication	Dosage	Frequency
_____	_____	_____
_____	_____	_____
_____	_____	_____

Briefly indicate the reason(s) for referral:

Please indicate any interventions or strategies you have implemented to address the above concerns:

Please include the following with your referral:

IEP
Eval Report
Standard Test Scores

BIP/PBIS Plan
Behavior Referrals
Health Records

Transcript
Attendance Records

Individual Referring: _____ Date: _____

Parent Signature: _____ Date: _____

For office use only

Date referral received: _____

By whom: _____

Meeting set up:

Yes/date: _____ No/reason: _____