

WATONWAN COUNTY HUMAN SERVICES

715 – 2nd AVENUE SOUTH, P.O. BOX 31

ST. JAMES, MN 56081

Phone (507) 375-3294 • Toll Free (888) 299-5941 • Fax (507) 375-7359

Truancy Referral Form

1. Parent contact information:

Mother: Cell: _____ Work: _____

Father: Cell: _____ Work: _____

Student lives with: Mother Father Both Other: _____

2. Primary language spoken by the parents: _____ Interpreter needed: Yes No

3. Intervention taken by the school to improve attendance (letters, phone calls, home visits, etc.):

4. Concerns from school staff (mental health concerns, bullying, substance use, problems within the home, etc.):

5. Does student have any of the following:

IEP

504 Plan

Behavior Problems

Emotional/Behavioral Disability

ESL