Intervention and Referral Services Franklin Township School Grades 6-8

Dear Franklin Township Staff Member:

The Intervention and Referral Services Committee (I&RS) has worked diligently to put together a complete packet of forms and information that will assist you should the need arise for student referral.

Our Mission Statement

The Student Intervention and Referral Services (I&RS) of Franklin Township School provide student support services to assist faculty and families in addressing academic, behavioral, and health problems, enabling the student to function more effectively in the classroom.

Our Procedures

When a student shows signs of needing assistance the following must occur:

- ✓ FULLY COMPLETE the *I&RS Request for Assistance* forms.
- ✓ Return the forms to the School Supervisor in a timely manner.
- ✓ The School Supervisor will set the meeting date and time and inform the referring teacher/parent.
- ✓ At the first meeting, strategies will be discussed and an action plan will be developed & distributed.
- ✓ Relevant paperwork will be placed in the student's I&RS binder in the School Supervisor's office.
- ✓ Follow up meetings will take place 6-8 weeks later. Teachers will be notified of the date, and parents will be invited to attend.
- ✓ The follow up meeting will determine if:
 - The original I&RS action plan needs to be modified
 - The original I&RS action plan should continue
 - Other options

I&RS referrals will be accepted from October 1st to May 2nd

Please don't hesitate to contact the School Supervisor or any of the committee members should you have any questions or concerns.

Intervention and Referral Services Initial Request for Assistance Form Confidential

TO:	Intervention and Referral Services Team					
FROM:						
DATE:						
STUDENT:	DOB:					
Reasons for Request for Assistance (Must be school-based issues, i.e., academics, behavior, school health):						
Specific and Descriptive Observed <u>Behaviors</u> (Hearsay or subjective comments will not be accepted):						
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Please list all teachers and/or specialist who have contact with this student.						

The "Prior Interventions" checklist must also be completed for your request to be considered.

Place the completed forms in a sealed envelope and return to the School Supervisor.

Intervention and Referral Services Initial Request for Assistance Teacher Prior Interventions Checklist Confidential

Staff Requesting Assistance:		Date:	
Stude	ent:	Grade:	
Pleas	e indicate the types of interventions you have tried prior to this	request for assistance	
1.	Spoke to student privately after class. a) Explained class rules and expectations. b) Explained my concerns.		
2.	Gave student help after class/school.		
3.	Changed student's seat.	\$10.000	
4.	Spoke with parent on the telephone. Phone number		
5.	Gave student special work at his/her level.		
6.	Checked cumulative folder.	-	
7.	Held conference with parent in school.		
8.	Sent home notices regarding behavior/school work.		
9.	Arranged an independent study program for student.		
10.	Gave student extra attention.		
11.	Set up contingency management program with student.	<u></u>	
12.	Assigned student detention.		
13.	Referred student to guidance, administration	_, other	
14.	Other (Please explain)		
Staff	Member's Signature	Date:	

Intervention and Referral Services Grades 6-8 Teacher Information Collection Form Confidential

Please complete this form in full, and return to the School Supervisor.

To: From: Date: Reference:	I & RS Team	
Classes in whic	h the above-named student is enrol	led:
Period(s) of the	day you see the student:	
the above-named Class Attendal Freque leave		ou or that you have noticed regarding Frequent tardinessFrequent absences Class cuts
	_advisor _nurse _other	Olass cuts
Failure to	ormance: rades, lower achievement complete in-class assignments complete homework assignments	Present grade Decrease in class participation Short attention span, easily

Classroom/Physical Observations:	w.r.o			
Attention-getting behavior,	Violating rules			
extreme negatives	Blaming, denying			
Fighting and/or sudden outbursts	Obscene language			
of anger and/or verbal abuse	gestures			
toward others	Hyperactivity,			
Sleeping in class	nervousness			
Deteriorating personal appearance	Other			
Atypical Behavior:				
Change in friends, change in behavior	Erratic behavior			
Sudden popularity	Constant adult			
Older or significantly younger	contact			
social group	Disoriented			
Sexual behavior in public	Unrealistic goals			
Talks freely about substance abuse	Depression			
Withdrawn, difficulty in relating	Defensive			
to others	Unexplained crying			
Inappropriate responses				
Home/Social/Family Problems:Family problemsPeer problemsFamily alcohol/drug problems Any discipline referrals, if so, reasons:	Runaway Job problems			
	-			
Please feel free to offer comments (positive) that you think will be helpful in addressing this student's needs. Remember, only comments that are school-based, school-focused, and specific, descriptive, objective/factual and observable are acceptable.				
Skills:				
Positive Characteristics, Strengths, Interests:				