



Elk Grove Unified School District Student Support Centers Referral Form

David Reese Student Support Center

Phone: 916-392-9081 Fax: 916-394-1634
Coordinator ~ Florence Oneto, LCSW, PPS
RTPT - Penny Clemons (Florin Region)
RTPT - Cheryl Rindflesch(Elk Grove, Monterey Trail,
Pleasant Grove, & Sheldon Regions)

Valley Student Support Center

Phone: 916-681-7577 Fax: 916-681-7578
Coordinator ~Diane Lampe, MS, PPS
RTPT - Patricia Garcia - Secondary
(Laguna, Valley, Franklin, &
Cosumnes Oaks Regions)

Prairie Student Support Center

Phone: 916-422-1091 Fax: 916-422-1152
Coordinator ~ Diane Lampe, MS, PPS
RTPT - Diane Campbell - Elementary
(Laguna, Valley, Franklin, &
Cosumnes Oaks Regions)

REQUIRED INFORMATION

Date: _____ Student #: _____

Student Name: _____ Birth Date: _____

Grade/Track: _____ School Site: _____

Parent(s)/Guardian Name(s): _____ Parent's primary language: _____

Home Phone #: _____ Work Phone#: _____

Referring Person: _____ Title: _____ phone #: _____

SST/PTC: Took place on (date): _____ Parent attended SST/PTC: Yes No

SST/PTC/IEP meeting is scheduled for (date): _____

IEP: Yes No 504: Yes No

REASON FOR REFERRAL:

Basic service needs: Clothing Shelter Food School Attendance Other Basic Needs _____

Homeless ~ Current Living Situation (if known): _____

Medical: Glasses/Eye Exam Immunizations Dental Care Medical care Connection to medical insurance

Counseling: Counseling for student Counseling for family Bereavement Counseling/Group Other Counseling

Additional Information and Other staff involved in intervention effort:

Have you discussed your concerns with the parent(s)/guardian? Yes No

Have you discussed your concerns with the student? Yes No

Have you told the parent/guardian about the referral to the Student Support Center? Yes No

Please describe your contact with the parent or the student and include any other important information:

