Community Service Board of Middle Georgia

APEX School Based Counseling

Universal Referral Form FAX: 478-275-6649

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| **Student’s Information** |
| **Name: Last, First, Middle Social Security #:** | **Gender:**[ ]  **Male** [ ]  **Female** | **Date of Birth:** |
| **Address:**  |  |
| **Student’s Primary Language:**[ ]  **English** [ ]  **Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Interpreter Needed:**[ ]  **Yes** [ ]  **No** |  | **Grade:** |
| **Does Student currently receive mental health services?** [ ]  **Yes** [ ]  **No** | **If YES, Agency/Provider:** |
| **Parent/Guardian:** | **Telephone:** |
| **Referral Source** |
| **Name:** | **Title:** | **Room #:** |
| **Telephone:**  | **Email:** |
| **Name of School:** [ ]  **ECI** [ ]  **Twin City Elementary** [ ]  **Swainsboro Primary** [ ]  **Swainsboro Elementary** [ ]  **Swainsboro Middle** [ ]  **Swainsboro High** [ ]  **Jenkins Elementary** [ ]  **Jenkins Middle** [ ]  **Jenkins High**  | [ ]  **Waynesboro Primary** [ ]  **Burke Middle** [ ]  **Burke High** [ ]  **SGA Elementary**[ ]  **Blakeney Elementary** [ ]  **Screven Elementary** [ ]  **Screven Middle**[ ]  **Screven High** [ ]  **Glascock Consolidated** [ ]  **Carver Elementary** [ ]  **Wrens Elem** [ ]  **Jefferson Middle**[ ]  **Jefferson High**[ ]  **Louisville Academy** |
| **Referral Source Signature: ­­­­­­­­­**  |  | **Date:**  |
| **Reason for Referral****Please indicate why this referral is necessary:** |
| [ ]  **Behavior difficulties at school** [ ]  **Grades are impacted** [ ]  **Other school concerns**[ ]  **Social concerns at school** [ ]  **Attendance issues** [ ]  **Family concerns** |
| **Check specific areas of concern:** |
| [ ]  Isolates from peers [ ]  Anger outbursts [ ]  Anxious mood [ ]  Argumentative [ ]  Attention-seeking behaviors [ ]  Bullied by others[ ]  Crying/tearfulness[ ]  Death of family/friend [ ]  Depressed mood [ ]  Destruction of property [ ]  Disrespectful behaviors[ ]  Disruptive behaviors [ ]  Easily distracted  |  [ ]  Excessive absenteeism [ ]  Excessive dislike of school [ ]  Excessive tardiness [ ]  Excluded by peers [ ]  Failure to complete or turn in homework [ ]  Failure/refusal to complete tasks [ ]  Frequent somatic complaints [ ]  Homeless[ ]  Inappropriate language/gestures [ ]  Inappropriate sexual behaviors [ ]  Lethargic/sleeping in class [ ]  Mood swings  | [ ]  Out-of-home placement [ ]  Parents’ divorce/separation [ ]  Physically aggressive [ ]  Poor/deteriorated hygiene [ ]  Recent withdrawal from friends [ ]  Refusal to comply with rules/requests [ ]  Slipping grades/failure to perform at expected levels [ ]  Sudden change in mood/behavior [ ]  Suspected substance abuse [ ]  Verbally threatening/aggressive  |
| **Brief Description of Presenting Problem** |
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