



# Student Attendance Referral

STUDENT: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ EFE PROGRAM: \_\_\_\_\_

INSTRUCTOR: \_\_\_\_\_ HOME SCHOOL: \_\_\_\_\_

COUNSELOR: \_\_\_\_\_

\_\_\_ 5 absences/semester  
Parent/Counselor notified

\_\_\_ 8 absences/semester  
Management Plan Developed

\_\_\_ 10 absences/semester  
Recommendation that student should not  
receive credit or enroll 2<sup>nd</sup> semester

\_\_\_ 3<sup>rd</sup> tardy/semester  
Parent/Counselor notified

\_\_\_ 4<sup>th</sup> tardy/semester  
Management Plan Developed

\_\_\_ OTHER

### Description of Attendance/Tardiness Problem:

(If sporadic, cite the pattern; if consecutive, state number of days and dates)

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### Instructor's Section

I have: \_\_\_ addressed student \_\_\_ contacted parent/guardian \_\_\_ contacted counselor

### Comments:

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### Student Management Plan:

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\_\_\_\_\_  
Instructor's Signature Date

\_\_\_\_\_  
Parent/Guardian's Signature Date

\_\_\_\_\_  
Counselor's Signature Date

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