

APPENDIX – IV
TEACHER'S REFERRAL FORM

All in information provided in here should be treated confidentially

Student : _____ Grade : _____ Date: _____

1. Reason for referral

Moods / Behaviours

- ☐ Anxious / worried
- ☐ Depressed / unhappy
- ☐ Eating disorder, body image concerns
- ☐ Hyperactive / inattentive
- ☐ Shy / withdrawn
- ☐ Low self-esteem
- ☐ Aggressive behaviours
- ☐ Stealing
- ☐ Other (please specify): _____

Academic Performance

- ☐ Lower grades / achievement
- ☐ Academic failure
- ☐ Missing work
- ☐ Incomplete work
- ☐ Declining quality of work
- ☐ Lack of motivation / apathy
- ☐ Missing classes
- ☐ Other (please specify) _____

2. This has been a concern since:

3. Any other problems / complaints not mentioned above

4. General observations by the teacher(s) pertaining to the student

5. Other relevant information

Referred by : _____

Signature : _____

Date Received _____