

STUDENT Referral Form

Student Support Services

Referral Guidelines

1. To refer a student to any service external to Student Support Services (SSS), an authorized staff member must complete and sign this form.
2. Student is to submit this form to the service provider upon arrival at the destination site.
3. A copy of this form must be kept on file with Student Support Services.
4. A copy of this form must be kept on file in the TRIO Director's office.
5. If a student is referred to a service, the student is expected to use the referral.
6. Service site is asked to return signed/dated form to SSS at above listed address and indicate below if student utilized the service.

Student Information

Student's Name
(Please Print): _____ Date: _____

Reason for Referral: _____ Date/ Time Referral to Start & End: _____

Student's E-Mail Address: _____ Student's Telephone Number: _____

Name of SSS Staff Member making Referral: _____

Student's Signature may be requested: _____

Referral Information (Service Site)

Name of Service Site: _____

Site Location or Address: _____ Site Telephone Number : _____

Reason for Referral (Explanation to service site): _____

Service Site Representative's Signature / Date requested: _____

Did student attend the service as referred by Student Support Services staff? _____

Note to Service site: Please return this form to the Student Support Services office by way of Inter-departmental Hand-mail to address above. Thank you.

For Student Support Services Office Use – Please do not mark below this area. Thank you.

Date signed referral form received / returned to SSS: _____

COMMENTS: