Graphical user interface

Description automatically generated with low confidenceUse this form to request behavioral/social-emotional/mental health support for a student from the Tier 2/3 Team (*use your local advanced tier team name here*). Please provide the main reasons for the request, as well as which data sources/evidence support the request.

**Date of request:** Click or tap to enter a date.

**Name of person making request:**

**Relationship to student:**  Teacher  Administrator  Staff  Family member  Peer  Self

**Student Name:**

**Grade:**

**Student’s teacher** *(edit as needed for middle/high school):*

Does this student have an IEP (check one)?  Yes  No

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**What are the main reasons for the request?** *(Check all that apply)*

Acting out (classroom disruption, defiance, disrespect, fighting, etc.)

Sad/withdrawn

Attention problem

Attendance or academic concerns

Social/friendship concerns

Family concerns

Substance misuse

Grief/loss (major life event, death, divorce)

Concerns about identity (isolation, bullying/harassment, bias, questioning, etc.)

Self-harm or harm to others

Other: please describe using the questions below

**What specifically have you seen/heard/observed that has led to the concern?**

*Answer here*

**What types of supports/interventions have already been tried for this student, if any?**

*Answer here*

**What would be different if services are successful? What result are you hoping for?**

*Answer here*

**What are some of the student’s strengths and/or interests?**

*Answer here*

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Description automatically generated with low confidence**How did this concern come to your attention? Did any of the following data sources/evidence support this request?** *Check all that apply. Please do not submit any documentation with this request:*

Teacher/staff observation

Parent/guardian observation

Peer observation

Office discipline referrals

Attendance records

Academic performance

Nurse visits

Universal screening scores

Suicide/risk assessment scores

Other (please describe):

**Please briefly provide any additional comments/context for this request below:**

*Answer here*

**Please submit this form to** *(describe your local school procedure for sending requests to the appropriate team member(s)*

**Once we have received and reviewed your request,** *(describe your procedure for closed loop referrals, i.e., if and how you will let the requestor know the outcome of their request.)*