

Information & Intervention
Lamoille Valley School Engagement Program
2020/2021 School Year

Please email (preferred), mail or fax this form to the attention of Emily Neilsen (eneilsen@lrcvt.org) with all 10 day letters (or 15/20+ letters if LVSEP has not yet received notice).

Date of referral: _____ Student Name: _____

Age: _____ DOB: _____ Student's School: _____

Grade Level: _____ School Year: _____

Parent Contact Information (address and phone #'s). If the student lives in multiple households, please indicate custody/educational rights:

***Please indicate student's schedule for 2020/2021 School Year (i.e. in-person, hybrid, in school and days of the week if hybrid)

Total days absent _____

Unexcused/unexplained _____

Excused _____

(PLEASE ATTACH ATTENDANCE SHEET)

Total days tardy _____

Are these the result of:

____ An illness or other health related event

____ A mental health issue

____ An event that occurred at school

____ A family trip

____ Unknown

____ Other

Lamoille Restorative Center
PO Box 148
Hyde Park, VT 05655
(802) 888-5871 phone
(802) 888-5400 fax

Please add any important/relevant information about student/family, including IEP/504/EST:

Please describe any interventions tried or plans that are currently in place to improve school engagement/attendance:

Suggested next steps for School Engagement Program:

___ Check in with student at school/ online

___ Family meeting

___ Letter home

___ Home visit (*limited for 20/21 school year)

___ Phone call to parent

___ Team meeting

___ File petition

___ Other, please describe:

Submitted by _____

Phone number _____

Role within School _____

Email _____

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