

DENTON COUNTY STUDENT REFERRAL FORM

ALLEGING TRUANT CONDUCT

School: _____ Contact: _____

Phone: _____ E-mail: _____

Student's Name:	Parent/Guardian Name:
Address:	Parent/Guardian Address (if different):
City State Zip	City State Zip
DOB:	
Age: Sex: Race:	
Social Security #:	Phone:
Student ID #	Student DL # (if known):

Check only those that apply:

- The student was at least 12 yoa and under 19 yoa when all alleged truant conduct occurred.

- Student's Parent/Guardian was notified of student's absence from school without excuse on three or more days or parts of days within a four-week period. (*attach copy of written notice*)

- Truancy Preventions Measures began on _____ and included (*check all that apply*):
 - A behavior improvement plan in accordance with EC 25.0915. (*attach copy of plan*)
 - School-based community service
 - Referral to other in-school or out-of-school services to wit: _____

- Student missed 10 or more days or parts of days (*as defined by the Denton County Uniform Truancy Policy Committee Recommendations Part 1*) within a six-month period. Dates of the 10 absences include: _____
 _____ (*Please attach attendance record*)

- The truancy is not related to pregnancy, being in a state foster program, being homeless, or being the principal income earner for student's family.

- The student has seen a Denton County Juvenile Case Manager.

- The student **IS** eligible for or receives Special Education Services under *Subchapter A, Chapter 29*.

- The Truancy Prevention measures failed to meaningfully address the student's school attendance. There were _____ unexcused absences since the implementation of the Truancy Prevention Measures.

- Filing was delayed in accordance with EC 25.0951(d)

Signature

Date