**SENATOBIA-TATE CO CTC COUNSELING REFERRAL FORM**

Date \_\_\_\_\_\_\_\_\_\_\_

Student’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade: \_\_\_\_ Home School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Career Tech Center Teacher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Referred by (if different than CTC teacher) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason(s) for referral:

( ) Motivation ( ) College Info

( ) Peer Relationships ( ) Career Info

( ) Excessive Absences/Tardies ( ) Family Relationships

( ) Grief/Sadness ( ) Anger Management

( ) Personal Issues ( ) Stress/Anxiety

( ) Grades/Graduation ( ) Student’s Request

( ) Other (please explain) ( ) Course Selection/Scheduling

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Concerns

Have you contacted parent/guardian about your concerns? \_\_\_\_\_\_\_\_\_

Explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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