

State of New Mexico

CHILDREN, YOUTH and FAMILIES DEPARTMENT

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Absenteeism Referral

As part of the Tier 4 interventions under the Attendance Success Act, CYFD would like to collaborate with you to support your student. The goal is to assist you and your administration in identifying and developing services that address excessive absenteeism. In order to set up an initial meeting with the student, the students' family, community service providers, and school personnel (may include the Principal), please complete this form with required documentation and return it to your local Juvenile Probation Office within 10 days of the student being identified as excessively absent.

Date: Select a Date.

School Information:

School Name: Enter School Name. Phone Number: Enter Phone Number.
Employee Name: Enter Employee Name. Job Title: Enter Job Title.

Email Address: Enter Email Address. Phone Number: Enter Phone Number.
Approval from Administrator/Principal: Yes No

Student Information:

Student Name: Enter Student Name. DOB: Enter DOB.
Grade: Enter Grade. Does the student have an IEP? Yes No
Phone/Cell Phone: Enter Phone/Cell phone.
State ID Number: Enter State ID Number.

Ethnicity (check all that apply):

American Indian/Alaskan Native Black or African American Hispanic
 Native Hawaiian or Pacific Islander Asian White
Affiliated with a Tribe or Pueblo? Yes No Unsure

If yes, what Tribe? Enter Tribe.

Family's first language, if not English: Enter First Language.

Has the school referred the student to Engage NM? Yes No

Has the school referred the student to any Community Yes No
Services/Providers?

If yes, please list which one(s)? (i.e., PB&J, JJAC, others)

Enter Community Services/Providers.

Parent/Guardian Information:

Name: Enter Name.

Relationship to the Student: Enter Relationship to Student.

Address: Enter Address. Zip Code: Enter Zip Code.

Phone/Cell Phone: Enter Phone/Cell Phone. Email Address: Enter Email Address.

Name: Enter Name.

Relationship to the student: Enter Relationship to Student.

Address: Enter Address. Zip Code: Enter Zip Code.

Phone/Cell Phone: Enter Phone/Cell Phone. Email Address: Enter Email Address.

Please include the following with this referral:

- Copies of the student attendance reports
- Copies of any and all excessive absenteeism notification letters
- Documentation of scheduled meetings that the family or student attended/failed to attend
- Copies of any intervention education plan (SAT Meetings, Attendance Meetings)
- Any other relevant information (Attendance Contracts, etc...)

*Referrals without required documentation may be returned.