



Probation Placement

ALBA Proactive Placement Referral Form

Referred by (name and title): _____ Date: _____ Phone/email: _____

Student: _____ DOB: _____ Male ___ Female ___ ID# _____

School: _____ Current Grade: _____ Class of: _____ HS Credits: _____

Parent/Guardian: _____ Phone/Email: _____

Address: _____

Check if applicable: Special Education Homeless/Foster 504 EL (translator needed: Yes No Language: _____

MHRS Services (Gen Ed or Special Ed) Substance Abuse Prevention Counseling

Was student last enrolled in Momentum Learning (JCCS); If yes, what site: _____

IEP Case Manager Name (if applicable): _____ Phone/email: _____

Other community agency workers (if applicable, probation, etc.): _____ Phone/email: _____

1. Reason for Referral (be specific – why does this student require this intervention?):

2. Describe student strengths, likes, and interests (what does the student do well?):

3. List dates and description of interventions that have been implemented (attach if needed):



4. Describe level of parent/guardian involvement/follow-through with school (Does the parent respond to support? Are they open to interventions?)

5. Has the parent/guardian missed any meetings? Yes No
If, yes please explain why the parent did not attend:

6. Has the parent/guardian been notified of this referral? Yes No

7. Please attach the following information:

- Discipline Summary
- Attendance Summary
- Current Schedule
- Current Grade Summary
- Transcript
- Current IEP or 504 (if applicable)
- Other: _____

Principal's Name: _____ Signature: _____ Date: _____

Office Use Only:

Referral Accepted and Approved

Requires More Information

Referral Declined. Reason:

Other/Notes:

Site Notified. Date:



San Diego Unified
SCHOOL DISTRICT