Garey High School

Counselor Intervention Form

(Please Print)

(Last Name) (First Name) (Grade) (Date)

(Referred by) (Class Period) (Room Number)

Referred to: Counselor (Minor) ❑

Please Check Appropriate Box:

[ ] No-Show for Teacher Detention
[ ] Non-Directed Offensive Language
[ ] Failure to Follow Instructions
[ ] Excessive Suit Cuts
[ ] Learning/Personal Problems
[ ] Class Disturbance
[ ] Safety and Dress Code Non-Compliance
[ ] Other _____

Counselor (Major) ❑

Please Check Appropriate Box:

[ ] Directed Offensive Language
[ ] Fighting
[ ] Destroying Property of School or Others
[ ] Continued Class Disturbance
[ ] Disrespect/Defiance to Teacher
[ ] Leaving Class Without Permission
[ ] Other_____

Prior Action Taken by Teacher:

Date			Date		
_____	[ ]	Counseled Student (1:1)	_____	[ ]	Contacted Parent: Letter__ Phone__
_____	[ ]	Changed Seat	_____	[ ]	Referral to Counselor
_____	[ ]	Checked Student Records	_____	[ ]	Referred to Student Study Teacm
_____	[ ]	Asssigned Teacher Detention	_____	[ ]	Referred for Tutoring
			_____	[ ]	Referral to Peer Counseling
			_____	[ ]	Other_____

Teacher Comments: _____

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Action: _____

❑ Detention _____ Date _____ Time _____ Room

❑ Saturday Det. _____ Hrs. _____ Date _____ Time _____ Room

❑ I.S.S. _____ Date _____ Time _____ Room

❑ Parent Contact/Conference _____ Date _____ Time _____ Room

Student Signature Phone Office Action By Date