



# LANE EDUCATION SERVICE DISTRICT NON-ATTENDANCE REFERRAL

INSTRUCTION TO SCHOOL: Please send this completed referral (and attachments) to the Lane ESD Non-Attendance Office as provided in ORS 339.080. The Truancy Department fax number is **(541) 461-8301**.

- PLEASE CHECK ONE:
- Lane ESD Processing ONLY
  - Truant Officer Investigation/Home Visit
  - Continued Non-Attendance/Conference Request

Today's Date: \_\_\_\_\_

FULL NAME OF THE STUDENT: \_\_\_\_\_

FULL ADDRESS: \_\_\_\_\_

STUDENT DATE OF BIRTH: \_\_\_\_\_ CURRENT GRADE: \_\_\_\_\_

HAS STUDENT BEEN PROVIDED WITH DMV-STATEMENT OF ENROLLMENT? (what date?): \_\_\_\_\_

FULL NAME OF PARENT/GUARDIAN: \_\_\_\_\_

PARENT/GUARDIAN DATE OF BIRTH: \_\_\_\_\_

IS STUDENT CURRENTLY ON AN IEP? \_\_\_\_\_

PARENT/GUARDIAN'S NATIVE LANGUAGE IF OTHER THAN ENGLISH: \_\_\_\_\_

TO YOUR KNOWLEDGE, DOES PARENT/GUARDIAN SPEAK AND READ ENGLISH? \_\_\_\_\_

TO YOUR KNOWLEDGE, IS THE STUDENT ON PAROLE OR PROBATION? \_\_\_\_\_

PLEASE LIST PAROLE/PROBATION OFFICER'S NAME AND ADDRESS: \_\_\_\_\_

BEST TIME /PLACE TO CONTACT PARENT/GUARDIAN (place of employment, work hours, phone no., etc.): \_\_\_\_\_  
\_\_\_\_\_

ARE THERE ANY PRECAUTIONS YOU RECOMMEND DURING A HOME VISIT?: \_\_\_\_\_  
\_\_\_\_\_

SUMMARY OF STUDENT'S ATTENDANCE -- Please attach an attendance record (*on single-sided paper*) with excused/unexcused absences noted as well as any additional background information you feel might be pertinent in conducting a non-attendance investigation (e.g. chronology of parent contacts, copies of letters, etc.)

NAME OF REQUESTOR: \_\_\_\_\_

TITLE/POSITION: \_\_\_\_\_ TELEPHONE NO.: \_\_\_\_\_

SCHOOL: \_\_\_\_\_ FAX NO.: \_\_\_\_\_

***A copy of the Lane ESD Truancy Officer report (for investigations/home visits and trials) will be returned to the school via fax unless otherwise requested.***

<i>For office use only.</i>		
Date received: _____	File No. _____	District: _____