

INTERVENTION AND REFERRAL SERVICES
SAMPLE GUIDANCE COUNSELOR FORM

Confidential

TO: _____
FROM: (Case Coordinator Name), I&RS Team
DATE: _____
REFERENCE: _____
GRADE: _____

The I&RS Team is gathering information on the above-named student. Your input is essential in developing a complete and accurate profile of this student. If there is information you prefer not to commit to writing or if you have any questions, please immediately contact me or another member of the team.

Confidential Information:

- Yes No Has a psychological evaluation been conducted on this student?
If yes, please describe: _____
- Yes No In addition to your role, are you aware of any kind of counseling
or therapy (current or past) that has been provided to the student? If yes,
please describe: _____
- Yes No Has any type of educational testing been conducted on this
student? If yes, please describe:

Parent Contacts:

Please provide information on the number, purposes and outcomes of parent contacts regarding this student.

Guidance Information:

Please give any additional information that you think would be helpful in the team's assessment of the student, including skills, positive characteristics and environmental supports. (Use the back of the form if necessary.)

