



School-based REQUEST FOR SERVICES

Ash Flat Jacksonville Jonesboro Mt. Home Osceola Paragould Piggott Pocahontas Searcy Trumann Walnut Ridge

Date of Referral: _____ Referred By: _____ Phone #: _____

Has the parent/guardian been informed that their child is being referred for services? No Yes Spoke with: _____

Name of Student: _____ DOB: _____ SSN: _____ Gender: _____

Insurance (if known): _____ School: _____ Grade: _____

Parent/Guardian: _____ Cell Phone: _____

Address: _____ City: _____ State: _____ ZIP: _____

Any of the following: Learning disability Hearing impairment Vision impairment English is not primary language

Symptoms Exhibited (Reason for Referral):

Emotional Disorders that impair school or academic functioning

- Anxiety and/or anxiety attacks that disrupts the learning environment
- Depression or history of suicidal ideation that disrupts the learning environment
- Frequent mood swings or mood instability that disrupts the learning environment
- Has spoken, written, drawn or otherwise shared thoughts of harming self or others to peers, teachers, or other school staff
- History of, or recent trauma, that causes symptoms that disrupts the learning environment

Behavioral Disorders that impair school or academic functioning

- Bullying or threatening peers or teachers
- Defiance and/or violation towards school rules and policies
- Destruction of school or peer property within the school
- Erratic or irrational behavior that disrupts the learning environment
- Has brought or boasted about bringing a weapon onto school property or using against peers, teachers, or other school staff
- History of running away from school
- Often initiates physical fights in the school
- Physical aggression towards peers, teachers, school staff
- Truancy
- Verbal aggression towards peers, teachers, school staff

Neurodevelopmental Disorders that impair school functioning:

- Autistic features: deficits in social interactions or communication that significantly impact school functioning
- Inattention and/or hyperactivity that impair school functioning

Other (please explain): _____

(FAX THE COMPLETED FORM TO THE CLINIC BELOW)

Ash Flat	Jacksonville	Jonesboro	Mt. Home	Osceola
Phone: 870.994.7060	501.982.5000	870.933.6886	870.425.1041	870.622.0592
Fax: 870.994.7063	501.596.9999	870.933.9395	870.425.1049	870.622.0782

Paragould	Piggott	Pocahontas	Searcy	Trumann	Walnut Ridge
Phone: 870.335.9483	870.598.0306	870.892.1005	501.305.2359	870.483.4003	870.886.5303
Fax: 870.335.9487	870.598.0328	870.892.0078	501.305.2348	870.483.4009	870.886.7002