Office Truancy Referral Form

Department of Education
P.O. Box DE Hagatña, Guam 96932
SY 2013-2014

School: _____

Student's Name:_____Grade:_Date: _____ Time:_____ am pm

Reported by: _____ *Teacher* *Staff* *Other*_____

Attempts to Address Unexcused Absences (Days 1-2, 4-5, 7-8, 10-11)

TEACHER COMMUNICATION LOG

1st ATTEMPT Teacher/Staff/School Personnel Intervention	**UNEXCUSED ABSENT DATE(S):**
Student Counseled: Date:_____Time:_____ am pm Sent Letter Home: Date: _____ Student Hand Carried: Delivered by: _____ Date: _____ Re Parent Contacted established: Yes No Name:_____Relationship:_____ Parent /Guardian Meeting: Date:_____Time:_____ am pm Other:_____	***Comments:*** Indicate student current academic performance. Is the student academically at risk?
Student Signature: ***Date:***	***Teacher/Staff Signature:*** ***Date:***
2nd ATTEMPT Teacher/Staff/School Personnel Intervention:	**UNEXCUSED ABSENT DATE(S):**
Student Counseled: Date:_____Time:_____ am pm Sent Letter Home: Date: _____ Student Hand Carried: Delivered by: _____ Date: _____ Referral to PFCOP Date: _____ Parent Contacted established: Yes No Name:_____Relationship:_____ Parent /Guardian Meeting: Date:_____Time:_____ am pm Other:_____	***Comments:*** Indicate student current academic performance. Is the student academically at risk?
Student Signature: ***Date:***	***Teacher/Staff Signature:*** ***Date:***
3rd ATTEMPT Teacher/Staff/School Personnel Intervention	**UNEXCUSED ABSENT DATE(S):**
Student Counseled: Date:_____Time:_____ am pm Sent Letter Home: Date: _____ Student Hand Carried: Delivered by: _____ Date: _____ Referral to PFCOP Date: _____ Parent Contacted established: Yes No Name:_____Relationship:_____ Parent /Guardian Meeting: Date:_____Time:_____ am pm Other:_____	***Comments:*** Indicate student current academic performance. Is the student academically at risk?
Student Signature: ***Date:***	***Teacher/Staff Signature:*** ***Date:***

INDICATE UNEXCUSED ABSENCES ONLY

August					*September*					*October*					*November*				
M	T	W	TH	F	M	T	W	TH	F	M	T	W	TH	F	M	T	W	TH	F
					H	4	5	6	7	1	2	3	4	5				1	H
					10	11	12	13	14	8	9	10	11	12	5	7	7	8	9
				17	17	18	19	20	21	15	16	17	18	19	H	13	14	15	16
20	21	22	23	24	24	25	26	27	28	22	23	24	25	26	19	20	21	H	22
27	28	29	30	31						29	30	31			26	27	28	29	30

December					*January*					*February*					*March*				
M	T	W	TH	F	M	T	W	TH	F	M	T	W	TH	F	M	T	W	TH	F
3	4	5	6	H		H	2	3	4					1					1
10	11	12	13	14	7	8	9	10	11	4	5	6	7	8	4	5	6	7	8
17	18	19	20	21	14	15	16	17	18	11	12	13	14	15	11	12	13	14	15
BREAK					H	22	23	24	25	18	19	20	21	22	18	19	20	21	22
BREAK					28	29	30	31		25	26	27	28		25	26	BREAK		

April					*May*					*June*				
M	T	W	TH	F	M	T	W	TH	F	M	T	W	TH	F
1	2	3	4	5			1	2	3	3	4	5	6	7
8	9	10	11	12	6	7	8	9	10	10	11	12		
15	16	17	18	19	13	14	15	16	17					
22	23	24	25	26	20	21	22	23	24					
29	30				H	**28**	29	30	31					

Total Days Unexcused:

_____

Revised as of: 7-23-12

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