



**INTERVENTIONS**  
(must provide written documentation)

3 unexcused (Teacher)

Date: \_\_\_\_\_


Summary of parent/child conference

\_\_\_\_\_

\_\_\_\_\_

5 unexcused (Guidance Counselor/Child Study Team)

Date: \_\_\_\_\_


8 unexcused (Administrator)

Date: \_\_\_\_\_

Summary: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*8 unexcused-certified letter from school administrator (send copy of certified letter)*

*10 unexcused (send referral to Visiting Teacher)*

*Social Work Referral (state problem)*
