# HOLLYWOOD HIGH SCHOOL
## CRISIS Referral Form

**REFERRAL INFORMATION**

___/___/___ _____ _____ _____
**Date Requested** **Referring Party (Name)** **Title** **Counselor**

_____ _____ ___/___/___ _____
**Student's Last Name** **Student's First Name** **DOB** **Grade/SLC**

_____ _____ **Circle one: Male Female**
**Home Language** **Student Language**

**Circle all that apply: OT IEP ESL Group Home/Foster Care Probation**

## Description of the Crisis:

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## Actions taken by the Referring Party:

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**Received Date:** _____ **Received By:** _____