

ANOKA-HENNEPIN REFERRAL/APPLICATION

CIRCLE ONE: Anoka-Hennepin Regional High School
763-506-7409 Holly Gill
763-506-7403 Fax

Anoka-Hennepin Technical High School
763-576-7960 Janice Cross
763-576-7961 Fax

Include a current transcript(STU204), student profile (STU201) and a current IEP with most recent ESR (if applicable) with this referral.

1. Student

(Last) (First) (Middle)
Date of Birth _____ Age _____ Grade _____ Sex _____

Address _____
(Street) (City) (State) (Zip)

Home Phone _____ Resides in Dist. # _____

Students Cell Phone _____

Parent/Guardian Name(s) _____

Address (if different than student) _____

Father's Work Phone # _____ Mother's Work Phone # _____

2. Name of Current School _____ Asst. Principal/Counselor _____
Or

Name of Last School _____ Date Last Attended _____

3. Probation Officer's Name _____ Phone # _____

4. Social Worker's Name _____ Phone # _____

5. Special Education / 504 Plans - *****A current copy of the IEP along with the most recent ESR must be attached to this referral. Students with IEP's must have a team planning meeting prior to revising the IEP or enrolling at any of the alternative programs. Alternative education staff must be a part of the planning meeting.***

A. Student currently receives Special Ed or 504 Accommodations: Yes _____ No _____
Disability _____ IEP or 504 Plan Date _____ IEP Setting _____

Special Ed Dept. Leader's Name _____ Phone # _____

B. Student is currently being assessed /re-evaluated for special education services: Yes _____ No _____

C. Student has received Special Ed services but services were terminated within the past calendar year:
Yes _____ No _____ Disability _____ Setting _____

D. Signature of Special Ed Dept. Leader: _____

Eligibility Criteria (Check all that apply):

- 1. Student is performing substantially below performance on local achievement tests
- 2. Student is at least one year behind in satisfactorily completing coursework
- 3. Student has been assessed as chemically dependent
- 4. Student is pregnant or is a parent
- 5. Student has been sexually or physically abused
- 6. Student is or has been homeless sometime in the last six months
- 7. Student has a limited English proficiency or speaks English as a second language
- 8. Student has been chronically truant or has withdrawn from school
- 9. Student has been excluded or expelled
- 10. Student has experienced mental health problems
- 11. Student is being referred by a school district for enrollment in an eligible non-traditional program.

Please explain: _____

*****Include a current transcript(STU204), student profile (STU201) and a current IEP with most recent ESR (if applicable) with this referral. Referrals are processed more quickly if the referral form is complete and necessary forms are attached.***

Date _____ Referred By _____