

Date: _____

Dear _____:

Thank you for referring _____

to the _____ We appreciate your willingness to work with us to achieve academic success as well as improved overall health.

The status of your referral is:

- Appointment has been scheduled.
- Parent has been contacted, and the student is on the wait list.
- Parent/guardian consent form needs to be completed.
- Parent or student declined services at this time.
- Parent or student has not followed through with services.
- Other _____

Thank you!