

**COMPLAINT - SCHOOL TRUANCY/DEFIANCE
FAMILY WITH SERVICE NEEDS**

JD-JM-119 New 10-97
C.G.S. §§ 46b-120, 149, 10-198a, 10-200

STATE OF CONNECTICUT
SUPERIOR COURT
JUVENILE MATTERS



ADDRESS OF COURT					DOCKET NO.			
NAME OF CHILD					GRADE	SEX	DATE OF BIRTH	
ADDRESS OF CHILD								
NAME OF MOTHER			ADDRESS OF MOTHER					
NAME OF FATHER			ADDRESS OF FATHER					
NAME OF GUARDIAN, IF ANY			ADDRESS OF GUARDIAN					
MOTHER'S HOME TEL.	MOTHER'S WORK TEL.	FATHER'S HOME TEL.	FATHER'S WORK TEL.	GUARDIAN'S HOME TEL.	GUARDIAN'S WORK TEL.			
NAME OF COMPLAINANT			ADDRESS OF COMPLAINANT					
NAME OF SCHOOL AND CONTACT PERSON AT SCHOOL				TELEPHONE	FAX NO.			

TYPE OF REFERRAL

THE ABOVE FAMILY IS A FAMILY WITH SERVICE NEEDS BECAUSE IT INCLUDES SAID CHILD WHO IS (PLACE AN "X" IN THE APPROPRIATE BOX(ES)):

- TRUANT** (Four (4) unexcused absences in one month or Ten (10) unexcused absences in a school year)
- HABITUALLY TRUANT** (Twenty (20) unexcused absences in a school year)
- DEFIANT** (Continuously and overtly defiant of school rules and regulations)

ATTENDANCE

In accordance with Connecticut General Statute § 10-198a, written notice has been sent to the parents of their obligations to assure their child's attendance at school.

YES

NO

LIST SPECIFIC DATES OF UNEXCUSED ABSENCES

BEHAVIOR

IF THIS REFERRAL IS BASED ON THE CHILD'S IN-SCHOOL CONDUCT RATHER THAN TRUANCY, PROVIDE DOCUMENTATION THAT THE CHILD HAS BEEN CONTINUOUSLY AND OVERTLY DEFIANT OF SCHOOL RULES AND REGULATIONS (List dates and description of behavior)

PARENTAL MEETING

LIST DATE(S) OF MEETING(S) WITH PARENTS

REASON(S) WHY CHILD IS TRUANT/DEFIANT

Parent or guardian failed to attend meeting on _____ or otherwise failed to cooperate with the school in attempting to solve the truancy problem

COMMUNITY SERVICES

DOCUMENT ATTEMPT(S) TO REFER TO COMMUNITY AGENCIES PROVIDING CHILD AND FAMILY SERVICES. LIST DATE(S) AND AGENCY(IES) AND PROVIDE REASON(S) WHY EFFORTS WERE SUCCESSFUL OR UNSUCCESSFUL.

DATE	COMMUNITY AGENCY (Name and Town)	RESULTS

DOCUMENTATION OF EVALUATIONS

PROVIDE DOCUMENTATION OF AN EDUCATIONAL EVALUATION CONDUCTED TO ASSESS THE APPROPRIATENESS OF THE CHILD'S REGULAR OR SPECIAL EDUCATIONAL PROGRAM, INCLUDING REFERRAL TO P.P.T. FOR EVALUATION OF THE SPECIAL EDUCATIONAL NEEDS OF THE CHILD BECAUSE ATTENDANCE WAS CONSIDERED UNSATISFACTORY. ("X" each box below that describes the school district's educational evaluation(s) of the child.)

Pre-Referral: Review of Regular Education Program from (Date): _____ to (Date): _____

- Identification of areas of concern
- Examination of current instructional program
- Selection of alternative procedure(s)
- Procedure(s) implemented from (Date): _____ to (Date): _____
- Procedure(s) successful OR Unsuccessful

Referral to Planning and Placement Team (PPT) for evaluation for Special Education eligibility

- Referred to Planning and Placement Team on (Date): _____
- List of evaluation(s) recommended by PPT: _____

- Child determined not eligible for special education (Date): _____
- Child determined eligible for special education (Date): _____
- If child eligible for special education, Individualized Education Plan (IEP) implemented on (Date): _____
- Last annual review of child's IEP (Date): _____

REFERRAL AUTHORIZATION

SIGNED (Superintendent of School, only)	PRINT OR TYPE NAME OF PERSON SIGNING	DATE SIGNED
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