_____Out of School Youth Service Referrals
202__- 20__

Name:	**NGS#:**
Cohort Year:	**Last Date of Enrollment:**

STUDENT CUMMULATIVE HISTORY:				
__504	__LEP	__Migrant	__Sp Ed	__Other:

REASON FOR DROPPING OUT:	
__Failed or Missed one or more sections of the State Assessments	
__Missing_____credits	Needed to work
__Multiple years in same grade level	Other:
ACADEMIC HISTORY:	
State Assessments	
TAKS Test	**STAAR Test**
ELA:	English I:
Math:	English II:
Science:	Algebra:
Social Studies:	Biology:
	US History:
CREDITS:	
Credits student earned:	
Student is lacking:	
INSTUCTIONAL SERVICES	
DISTRICT SERVICES	**REFERRED SERVICES**
__State Assessment Remediation (Test Prep)	__High School Equivalency Program:
__Health Education	__GED:
__Pre-GED	__Distance Learning:
__Tutorial	__Workforce Solutions
__Life Skills	__Job/Vocational Training:
__Credit Recovery:	__ESL:
__Distance Learning:	__Adult Basic Education (ABE):
__Math	__Computer Literacy:
__Reading	__Credit Recovery:
__PASS	__Pre-GED:
__Project SMART	__Other:
__Other:	
SUPPORT SERVICES	
DISTRICT SERVICES	**REFERRED SERVICES**
__Clothing	__Transportation:
__Counseling Services	__WIC
__Materials and Resources	__Housing:
__School Supplies	__Medical Services:
__Counseling Leading to Re-enrollment	__Dental Check-Up:
__Tools Used for Academic Assistance:	__Vision Exam:
__Other:	__Hearing Screening:
	__Translation/Interpretation
	__Nutrition
	__Child Care:
	__Other: