

## Professional Referral Form/Letter of Support

This section is to be completed by a professional referee who has an understanding of the student's educational support needs. Typically, a suitable referee may include a Principal, Deputy Principal, or Guidance Officer. The criteria for Special Assistance Schools (SASs) in Queensland requires a student to have disengaged or be at serious risk of disengagement from mainstream schooling. Factors may include behaviour, social emotional factors, or the impact of a disability.

Student's Name: Recommended Grade/Year of Entry: (eg. Grade 11 in 2024)

Student's D.O.B: Year 11 Year 12

Referee's Name: Referees Employer/Organisation: Year

Referee's Profession:

Principal Deputy Principal Guidance Officer Other

Phone: Email Contact:

Student LUI if known: Student USI if known:

In what capacity/role have you supported the student?

Identify the area/s the student is showing evidence of disengagement at your school/context?

Attendance Concerns	Parent Request	Disability Needs: (diagnosis if applicable)
Behavioural Needs	Social/Emotional	Physical
Excluded/Suspension		Cognitive
		Sensory
		Social/Emotional
		Other, please specify:

Explain how the student is disengaged or at high risk of disengaging from the area/s identified. In responding, the details section must be completed for each area identified below:

In what capacity has the school supported the student, with the above? Please list all strategies implemented and identify the effectiveness of implementation.

In your view, what support would be needed to re-engage this student in education?

*Please attach any relevant assessment or reports or additional relevant information regarding the needs of the students. eg. individual learning plan, behaviour support plan, safety plan.*

Previous School:

Date last  
attended:

Supporting Documents (tick all that apply)

IEP / ICP / ILP  
Academic Report  
Speech / Language Assessments  
Management Plans (Behavioural / Medical)  
Incident / Behavioural History  
Attendance Summary  
Diagnostic Test Results  
Guidance Officer Reports  
Court Orders  
Other:

Referee's Signature:

Date: