



**Guam Department of Education  
Form I: Child Study Team I Other Personnel Input**

**FORM TO BE COMPLETED BY:**

Social Worker, School Attendance Officer, or Non-Instructional Personnel

(Revised 6/17/24)

Date Completed:

<b>Student:</b>	<b>Student #:</b>
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The exam/screening information shall be completed by the Social Worker, School Attendance Officer, or non-instructional personal and forwarded to the Child Study Team for review and to assist the team on what additional data, if any, is needed.

**School Attendance Officer Name:**

*Does the student have record of Office Truancy Referral?* ☐ Yes ☐ No

Student Attendance Referral form (SARF) completed and submitted to the attendance officer: ☐ Yes ☐ No

Truancy Checklist Results attached: ☐ Yes ☐ No

Provide any comments in response to the SARF that should be considered by the CST:

**Social Worker Name:**

*Was there a referral made to School Climate Culture & Engagement Project?* ☐ Yes ☐ No

Provide comments in response to the referral that should be considered by the CST:

**Non-Instructional Personnel Name:**

Indicate Position Title:

*Any supporting documents reviewed and attached?* ☐ Yes ☐ No

Provide comments that should be considered by the CST: