



## OASIS Referral Form

### Section 1: Student & Family Please Complete

Student Name: \_\_\_\_\_ Parent Name: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

School attending: \_\_\_\_\_ Grade: \_\_\_\_\_

School counselor: \_\_\_\_\_

➤ The student (please check all that apply):

\_\_\_\_ Has an IEP      \_\_\_\_ Has a 504      \_\_\_\_ Has a safety plan      \_\_\_\_ Needs NCAA Eligibility

Why do you think OASIS would be a good fit?

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

### Section 2: Home Building Staff Please Complete

➤ What is the main reason for this referral?

\_\_\_\_ Credit deficient      \_\_\_\_ Social      \_\_\_\_ Academic      \_\_\_\_ Competitive sports

\_\_\_\_ Physical Health      \_\_\_\_ Mental Health      \_\_\_\_ Behavior      \_\_\_\_ Other

➤ Student intends to:

\_\_\_\_ physically attend      \_\_\_\_ work virtually      \_\_\_\_ hybrid      \_\_\_\_ not sure

➤ Is the student on a 504 or IEP or undergoing evaluation for a disability? \_\_\_\_\_

**Note:** If the student is on an IEP or 504 the assigned IS will be required to amend the IEP or 504 before the student transfers to OASIS. If the student is undergoing evaluation, the home school needs to finish the evaluation and develop the IEP/504 if student qualifies.

★ If the student is on an IEP or 504 please fill out Section 2A on page 2.

★ If the student is a Junior or Senior please fill out Section 2B on page 2.

\_\_\_\_\_  
Principal/Counselor Name

\_\_\_\_\_  
Principal/Counselor Signature

\_\_\_\_\_  
Date

**Section 2A: If the student has a 504 or IEP**

Describe in detail the interventions attempted to help the student's success in the traditional setting:

Date of IEP/504 team meeting: \_\_\_\_\_ Intervention Specialist Name: \_\_\_\_\_

Intervention Specialist Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Section 2B: If the student is a Junior or Senior**

What credits are left to graduate?

Which OST's are needed to graduate?