



Student Attendance/Tardy Intervention Plan

Date: / /

Students Name		
First:	Middle:	Last:
Date of Birth: / /	Gender: Male: <input type="checkbox"/> Female: <input type="checkbox"/>	Ethnicity: Black: <input type="checkbox"/> White: <input type="checkbox"/> Hispanic: <input type="checkbox"/> Other: <input type="checkbox"/>

School:	District Attendance Office Referral Date: _____	IEP: Yes <input type="checkbox"/> No <input type="checkbox"/>
Grade: _____	DSS Referral Date: _____	SAO: Yes <input type="checkbox"/> No <input type="checkbox"/> Exp. Date: _____

Parent/Guardian Name:

Address:

Street City State Zip

Mailing Address (if different):

Street City State Zip

Contact Numbers:	
Home: () -	Work: () -
Mobile: () -	Emergency/Other: () -

S.C. Code Section 59-65-10 states that failure to ensure that your child attends school is a criminal offense and subjects **YOU** to criminal prosecution, to a fine of no more than fifty dollars (\$50) and possible jail sentence of no more than thirty (30) days. Understand that each day's absence shall be considered a separate offense.

Totals: FROM THE BEGINNING OF THE SCHOOL UNTIL CURRENT DATE						
Excused Absences:	Unexcused Absences:	Unexcused Tardies:	ISS Days:	OSS Days:	Total Days Missed:	As of: / /

Reasons for unlawful absences/tardies:

What actions will be taken by the Parent/Guardian and Student to resolve continued unlawful absences/tardies?

Parent/Guardian Response:

Student Response:

What actions will be taken by the school to assist Parent/Guardian and Student in resolving continued unlawful absences/tardies?

Note: Use this section to follow-up, document updates, and refer to Attendance Supervisor if needed.

Date: / /	Results of actions taken by parent/guardian and student to resolve causes of unlawful absences/tardies: (Please document as results occur.)
Parent/Guardian Response:	
Student Response:	

Date: / /	Results of actions taken by School Personnel to assist family in resolving unlawful absences/tardies: (Please document as results occur.)

Total Absences/Tardies AT THE TIME OF REFERRAL TO DISTRICT ATTENDANCE SUPERVISOR:						
Excused:	Unexcused:	Unexcused Tardies:	ISS Days:	OSS Days:	Total Days Missed:	As of:
						/ /

Important: If more space is needed for documentation, please use additional sheets of paper and attach.

Please attach student's Attendance, Discipline, and Grades.

Additional Comments:

Signatures:	Print Name	Signature
School Principal/ Assistant Principal		
School Personnel		
School Personnel		
Student		
Parent/Guardian		
Parent/Guardian		