

SUWANNEE COUNTY SCHOOLS
702 2ND STREET NW
LIVE OAK, FL 32064

SUMMARY OF STUDENT CONTACT

Student: _____ School: _____

Student Services Professional: _____ Date: _____

Summary of Contact:

Actions: (Check all that apply)

Contact Name:

- Parent contact made (REQUIRED): _____
- Inform school administrator (REQUIRED): _____
- Consult with school resource officer/law enforcement: _____
- Consult with appropriate school staff: _____
- Referral to community agency: _____
- Referral to crisis center: _____
- Other actions: _____

School Student Services Professional/Title

Distribution: Counselor's File
Do not place in cumulative folder.