



Ogeechee Technical College  
**FIRST ALERT REFERRAL**

Print Form to Complete



DATE: \_\_\_\_\_

TO: RETENTION & SUPPORT SERVICES

FROM: \_\_\_\_\_

*Instructor*

Based upon my observations and discussions with the student mentioned below, I am referring this student to Retention and Support Services.

STUDENT NAME: \_\_\_\_\_

STUDENT ID #: \_\_\_\_\_ CLASS: \_\_\_\_\_

Further, I believe that this student's academic achievement is important and I would encourage this student to seek assistance from the Retention and Support Services Office in the specific areas indicated below:

- |   |   |
|---|---|
| <input type="checkbox"/> Attendance               | <input type="checkbox"/> Depression/Anxiety     |
| <input type="checkbox"/> Low Grade Average        | <input type="checkbox"/> Interpersonal Conflict |
| <input type="checkbox"/> Tutoring                 | <input type="checkbox"/> Anger Management       |
| <input type="checkbox"/> Study Skills             | <input type="checkbox"/> Disruptive Behavior    |
| <input type="checkbox"/> Test Taking/Test Anxiety | <input type="checkbox"/> Family Counseling      |
| <input type="checkbox"/> Reading Comprehension    | <input type="checkbox"/> Stress Management      |
| <input type="checkbox"/> Other: _____             |   |

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RETENTION AND SUPPORT SERVICES STAFF

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486-7811

MS. PENNY HENDRIX  
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