**Attempted/Offered Truancy Interventions during *Current* School Year**

(Please include dates, factual details, and outcomes)

Offered to arrange morning wake up calls:

Offered to adjust student’s schedule:

Offered transportation changes:

Provided individualized instruction:

As required according to student’s IEP ***and*** student’s absences are not related to his/her IEP needs:

Student does not have an IEP. Made a special education referral:

ELL evaluation and assessment undertaken:

Student currently receives ELL services ***and*** student’s absences are not related to his/her ELL needs:

Offered tutoring:

Held Guidance Team Meeting/Staffing/Etc.:

Offered special school district programs:

Offered alternative school placement:

Offered retention or credit retrieval programs:

Offered to arrange counseling:

Referred student to community resources:

Conducted home visits/ welfare checks:

Informed the student’s probation counselor about student’s attendance:

Referred the student to  Truancy Representative or  Community Truancy Board:

Other:

Petitioner is requesting jurisdiction over the **parent/guardian(s)** for failure to do the following to cause the student to attend school:

I certify that the above information was obtained from school records kept in the regular course of business, at or near the time of the event, and is true and accurate. I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct to the best of my knowledge.

Signed this \_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_ in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, WA.

Print name of person filing this form Signature

Job Title