Alachua County Public Schools

Truancy Intervention Documentation

(Middle and High Schools Should Complete This Form)

Child's Name: _____

Date of Birth: _____ Race: _____ Sex: _____

Please list below the attached records that show proof of the child's date of birth

☐ Copy of child's birth certificate

☐ Doctor's records

☐ Other _____

Full name of parent(s) or legal guardian(s): _____

Please list below the attached records that show proof of the guardianship

☐ Copy of child's birth certificate

☐ Other _____

Address of parent and child:_____

_____

_____

School child is to attend: _____

Name of records custodian: _____

During the _____ calendar school year, the child has ___ unexcused, ___ excused absences, & ___ unexcused tardies.

During the 90-day period of ____-____, the child accumulated ___unexcused absences & ___ unexcused tardies.

(Documentation of absences attached) [***NOTE**: 6 unexcused tardies/early releases equals 1 unexcused day for truancy purposes.]*

The parent(s)/guardian(s) were contacted on the following dates regarding the child's non-attendance:

Date	**Letter Phone Personal**	**By Whom**

The child and parent were referred to the Educational Planning Team (EPT) on: _____

The parent ☐ did, ☐ did not attend the parent meeting with the Educational Planning Team on _____

The Educational Planning Team implemented interventions to address the problem, was diligent in facilitating services and all reasonable efforts to resolve non-attendance have been exhausted (documents from EPT meeting and intervention attached). (Fla. Stat §1003.26(1)(d)).