

PHILIPPINE SCIENCE HIGH SCHOOL SYSTEM Campus:
qcsascas

REFERRAL FORM

Name of Student: pxcqkaxas

Grade & Section: adascw Date: 2024-03-30

Concern: (put an x inside the box)

- ☒ Academic
☒ Behavior
☐ Personal/Social

Brief Description:
ascscasa

Intervention/s Done:
acacwes

Requires Follow-up? (☒) Yes () No

Referred by:

Signature over  a
& Designation

PSHS-00-F-GCU-03-Ver02-Rev0-02/01/20

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BEHAVIORS SPOTTED:

Put an 'x' mark inside the box/es pertaining to the specific behaviors you have observed from _____ the student you are referring:

- ☒ depressed or apathetic mood
- ☒ expression of helplessness, hopelessness, worthlessness
- ☐ evidence of crying
- ☐ verbal expressions or gestures of suicide
- ☐ noticeable changes in mood and/or sudden outburst

- ☐ inappropriate or exaggerated emotional reactions to situations, including a lack of emotional response to stressful events
- ☐ excessive dependency on others or extreme withdrawal and isolation from others
- ☐ excessive activity or talkativeness
- ☐ unusual or noticeable changed interaction patterns with friends or classmates
- ☐ new or continuous behaviour which disrupts the class
- ☐ noticeable changes in physical appearance (weight, dress, hygiene)

- ☐ extremely poor academic performance, or a drastic decline in grades
- ☐ others, please specify _____ example others _____

Name Signature

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