## **After School Work Completion Referral Form**

This takes place in the Learning Hub on Wednesdays and Thursdays from 3:30 - 4:00pm.

Student Name:			HG / Yr Level:		
This referral has b	een made due to:				
<ul> <li>□ failure to complete or submit assessment items/work</li> <li>□ persistent non completion or limited effort with class work, homework or assignments</li> </ul>		communi s <b>u</b> persisten	<ul> <li>non-completion of 'second chance' lunchtime community service</li> <li>persistent lunchtime community service bookings due to lateness to school, or truancy</li> </ul>		
Subject:		Teacher:			
Details of work no	eeding to be completed:				
Subject teacher no	tified student of impending After sch	ool Work Comple	tion and location on:	/ /	
SSO Administration	Only:				
Student Booked in or	n: Wednesday / /		☐ Thursday /	/	
Documentation:	☐ Placed on DayMap Roll	☐ Placed on DayMap Roll ☐ SMS Reminder Sent			
Caregiver Contact #1	: Name:	F	Phone:		
Caregiver Contact #2	: Name:	F	Phone:		
Comment:			•		
YLL Feedback					
Student Attendance a follow-up:	and □ Student Attended (return form to referring teache	r) (return	☐ Student <b>did not</b> attend (return form to Zone SSO) ☐ Rebooked ASWC for: ☐ Attempted, left message ☐ Attempted, unable to leave message		
Comment:	•	l			
Notification:	☐ DayMap Note entered	□ Da	☐ DayMap note sent to YLL/subject teacher		