



Mower County Health and Human Services
201 1st Street NE, Suite 18
Austin, MN 55912
Phone: 507-437-9701 | Fax: 507-437-9721
www.co.mower.mn.us

Educational Neglect Referral Form

Only complete this referral if your school's attendance policy has been thoroughly followed, AND there has been at least 7 full-day unexcused absences.

Note: The student's attendance record must be included with this referral form.

Date:

Referrer's Information	
Name	
Title	
School	
Address	
Phone Number	
Email address	

Student of Concern		
Name	DOB	Grade

Parent/Guardian Information			
Name	Relationship	Address	Phone

Other child(ren) in the home:

To your knowledge, does Native American heritage apply to the family?

Yes No Unknown

