



Northern Lebanon School District

345 School Drive
Fredericksburg, PA 17026

Student Assistance Team: Referral Form

Confidential

To: High School Student Assistance Team

Person Referring: _____

Date: _____

Student being referred: _____

Reasons for concern: (Please note, emergency situations should be immediately brought to the attention of a Student Assistance Team member or guidance counselor.)

Please return, in a sealed envelope, to the High School Guidance Office.