



Referral for ESOL Counseling

Office of Student and Family Support and Engagement
International Admissions and Enrollment
MONTGOMERY COUNTY PUBLIC SCHOOLS
850 Hungerford Drive, Rockville, Maryland 20850

MCPS Form 335-60
January 2018

INSTRUCTIONS: The mission of the English for Speakers of Other Languages (ESOL) Counseling Team is to provide counseling services to ESOL students from a cross-cultural perspective so they may succeed academically and adjust to a new social and cultural environment. MCPS school staff should complete this form if they determine that an ESOL student could benefit from these services. School staff should complete Part I of this form and e-mail it to ESOLcounselor@mcpsmd.org. See the ESOL counseling website for more information: www.montgomeryschoolsmd.org/curriculum/esol/counseling.aspx

PART I: Complete Part I and e-mail it to ESOLcounselor@mcpsmd.org

Student Name _____ Date ____/____/____

School Name _____ Student ID # _____

Grade _____ ESOL Level _____ Language spoken _____

Reason(s) for Referral:

- Academic
- Behavioral
- Social
- Personal
- Attendance
- Health
- Special Services
- New Student Orientation
- Other (specify) _____

Previous action taken:

- Parent involvement
- Administrative/Counselor involvement
- CAP/EMT/IEP
- Other (specify) _____

Comments

Name and position of person making referral _____

PART II: ACTION TAKEN BY ESOL COUNSELOR

DATE RECEIVED ____/____/____

- Reviewed cumulative folder
- Consulted with ESOL teacher(s)/school staff member(s)
- Consulted with school counselor
- Met with student(s) Date ____/____/____
- Consulted with parent community coordinator
- Updated school counselor
- Updated ESOL teacher/school staff member
- Contacted parent(s)/guardian(s)
- Other (specify) _____

Follow-up

- One-on-one counseling
- Include student in counseling group

Name of Assigned ESOL Counselor _____